

Fill in this information to identify your case:

United States Bankruptcy Court for the:

MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE DIVISION

Case number (if known)

Chapter

7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name **New York City Vacations, Inc.**

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

New York City Vacati Packages (NYCVP)

3. Debtor's federal Employer Identification Number (EIN) **23-3070549**

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

**300 Market St
Kingston, PA 18704-5426**

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Luzerne

County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) **www.nyctrip.com**

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. Check all that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☐ Funds will be available for distribution to unsecured creditors.

☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☐ 50-99

☐ 100-199

☒ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor New York City Vacations, Inc.
Name

Case number (if known) _____

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 10, 2020
MM / DD / YYYY

X /s/ Barry Tenenbaum
Signature of authorized representative of debtor

Title President

Barry Tenenbaum
Printed name

18. Signature of attorney

X /s/ David Harris
Signature of attorney for debtor

Date June 10, 2020
MM / DD / YYYY

David Harris
Printed name

Law Office of David J. Harris
Firm name

67-69 Public Sq Ste 700
Wilkes Barre, PA 18701-2515
Number, Street, City, State & ZIP Code

Contact phone (570) 823-9400 Email address dh@lawofficeofdavidharris.com

48558 (PA)
Bar number and State

Fill in this information to identify the case:Debtor name **New York City Vacations, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE
DIVISION**

Case number (if known) _____

☐ Check if this is an
amended filing**Official Form 206Sum**
Summary of Assets and Liabilities for Non-Individuals**12/15****Part 1: Summary of Assets**1. *Schedule A/B: Assets-Real and Personal Property* (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **1,238,338.16****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **1,238,338.16****Part 2: Summary of Liabilities**2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)Copy the total dollar amount listed in Column A Amount of claim, from line 3 of *Schedule D*..... \$ **0.00**3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **2,227,153.12****4. Total liabilities**
Lines 2 + 3a + 3b\$ **2,227,153.12**

Fill in this information to identify the case:

Debtor name New York City Vacations, Inc.

United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE
DIVISION

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property*(Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property*(Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases*(Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☒ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 10, 2020

X /s/ Barry Tenenbaum

Signature of individual signing on behalf of debtor

Barry Tenenbaum

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name New York City Vacations, Inc.

United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE
DIVISION

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From **1/01/2020** to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business

☐ Other _____

Gross revenue
(before deductions and exclusions)

\$175,000.00

For prior year:
From **1/01/2019** to **12/31/2019**

☒ Operating a business

☐ Other _____

\$7,912,272.00

For year before that:
From **1/01/2018** to **12/31/2018**

☒ Operating a business

☐ Other _____

\$7,040,287.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. SEE ATTACHED EXHIBIT -- SOFA #3		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. See EXHIBIT SOFA #30		\$0.00	

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Law Office of David J. Harris 67-69 Public Sq Ste 700 Wilkes Barre, PA 18701-2515	\$7835.00 = Advance of Attorney's Fee and Filing Fee	5/12/2020 and 5/26/2020	\$7,835.00
Email or website address			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address

Dates of occupancy
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
- ☒ Yes. Does the debtor serve as plan administrator?

☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

Mass Mutual 401(k)

Employer identification number of the plan

EIN: _____

Has the plan been terminated?

- ☒ No
- ☐ Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☐ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		Dates business existed

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. Tom Stires, CPA 22 Preston Rd Dallas, PA 18612-9082	1998 to Present
26a.2. Maria Jardines 27 Yellow Run Rd Jim Thorpe, PA 18229-2704	September 2018 to Present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26b.1. Same as 26(a)	

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Same as 26(a)	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. Elavon 7300 Chapman Hwy Knoxville, TN 37920-6612
26d.2. American Express PO Box 981535 El Paso, TX 79998-1535
26d.3. Commonwealth Bank 64 N Franklin St Wilkes Barre, PA 18701-1301

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No
☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory**Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Barry Tenenbaum	178 Pioneer Ave Shavertown, PA 18708	President and Shareholder	50%

Name	Address	Position and nature of any interest	% of interest, if any
Estate Of Faye Tenenbaum		Shareholder	50%

Name	Address	Position and nature of any interest	% of interest, if any
Joel Cohen		Executive Vice President	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No
☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Faye Tenenbaum		Secretary/Treasurer	From inception until her death in 2019

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Shareholders, Officers, Directors		Last 365 Days	
Relationship to debtor See EXHIBIT -- SOFA #30			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Debtor New York City Vacations, Inc.

Case number (if known) _____

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

Contributions to 401(k), but not to a pension.

EIN:

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 10, 2020

/s/ Barry Tenenbaum
Signature of individual signing on behalf of the debtor

Barry Tenenbaum
Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207)* attached?

- ☒ No
☐ Yes

AAA Central PennGroup
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Harrisburg, PA 17110-9688

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Adrian, MN 56110-1068

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Shanise Johnson
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Beatrice, NE 68310-4850

Sheraton NY Times Square
ATTN: Valerie Dillon
811 7th Ave
New York, NY 10019-6002

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Evington, VA 24550-1900

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Dream Vacations, a Cruise
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Kathleen, GA 31047-1608

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Terry Flowers
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The Travel Company
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Tonya Matthews
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Tramaine Yarbrough
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Trudy Crain
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New York, NY 10018-3064

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Fort Pierce, FL 34945-5996

Yvonne Culligan
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Princeton, MN 55371-2326

Zack Kincheloe
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Chico, CA 95926-2847

Debtor name	New York City Vacations, Inc.
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE DIVISION
Case number (if known)	

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

☐ No. Go to Part 2.

☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (*Identify all*)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Community Bank (Acct # 10006966)

Checking Account

\$0.00

3.2. Community Bank (Acct #4418004972)

Payroll Account

\$1,208.55

3.3. Community Bank (Acct #2140213899)

Deposit Account

\$790,557.60

4. **Other cash equivalents** (*Identify all*)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$791,766.15

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

☐ No. Go to Part 3.

☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

Deposits and payments on account to or for vendors, hotels, Broadway theater

7.1. tickets, airline tickets

\$230,069.39

Debtor New York City Vacations, Inc.
Name

Case number (If known) _____

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$230,069.39

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 50,500.00 - 0.00 = \$50,500.00
face amount doubtful or uncollectible accounts

11a. 90 days old or less: 15,743.33 - 0.00 = \$15,743.33
face amount doubtful or uncollectible accounts

11a. 90 days old or less: 27,440.58 - 0.00 = \$27,440.58
face amount doubtful or uncollectible accounts

11a. 90 days old or less: 64,218.99 - 0.00 = \$64,218.99
face amount doubtful or uncollectible accounts

11a. 90 days old or less: 19.17 - 0.00 = \$19.17
face amount doubtful or uncollectible accounts

11a. 90 days old or less: 29,222.45 - 0.00 = \$29,222.45
face amount doubtful or uncollectible accounts

11a. 90 days old or less: 534.20 - 0.00 = \$534.20
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$187,678.72

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

Debtor New York City Vacations, Inc.
Name

Case number (If known) _____

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
	Gift cards (Target and Walmart)		\$1,820.00		\$1,820.00
	NYC Metro Cards		\$1,205.50		\$1,205.50
	Empire State Building Observation Deck Admission Tickets		\$2,364.00		\$2,364.00
	NY Yankee Tickets		\$6,900.00		\$6,900.00
	US Open Tickets		\$4,800.00		\$4,800.00
	Music Man Broadway Theater Tickets		\$10,734.40		\$10,734.40

22. Other inventory or supplies

23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

\$27,823.90

24. Is any of the property listed in Part 5 perishable?

- ☒ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.

Debtor New York City Vacations, Inc.
Name

Case number (If known) _____

☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Office Furniture and Computers	\$1,000.00		\$1,000.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software			
42.	Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43.	Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$1,000.00
44.	Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45.	Has any of the property listed in Part 7 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites NYCTripQuote (nyctripquote.nyctrip.com), NYCTicketMachine (nycsightseeing.nyctrip.com)	unknown		unknown

62. Licenses, franchises, and royalties
Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 4

Debtor New York City Vacations, Inc.
Name

Case number (If known) _____

63. **Customer lists, mailing lists, or other compilations**

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)

☒ No

☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

☒ No

☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.

☒ Yes Fill in the information below.

Current value of
debtor's interest

71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets, country club membership

AMEX Rewards Points

unknown

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor New York City Vacations, Inc.
Name

Case number (If known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$791,766.15</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$230,069.39</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$187,678.72</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$27,823.90</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$1,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$1,238,338.16</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$1,238,338.16</u>

Fill in this information to identify the case:

Debtor name New York City Vacations, Inc.

United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE
DIVISION

Case number (if known) _____

☐ Check if this is an
amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name **New York City Vacations, Inc.**

United States Bankruptcy Court for the: **MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE DIVISION**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	<p>Nonpriority creditor's name and mailing address AAA Central Penn Group 2301 Paxton Church Rd Harrisburg, PA 17110-9688 Date(s) debt was incurred _____ Last 4 digits of account number 3612</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$7,848.00
3.2	<p>Nonpriority creditor's name and mailing address AAA Central Penn 2301 Paxton Church Rd Harrisburg, PA 17110-9688 Date(s) debt was incurred _____ Last 4 digits of account number 4448</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$250.00
3.3	<p>Nonpriority creditor's name and mailing address Adele Grubbs 1010 Grantham Way Marietta, GA 30006 Date(s) debt was incurred _____ Last 4 digits of account number 5101</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,525.76
3.4	<p>Nonpriority creditor's name and mailing address Adrian Patrick 32811 State Highway Dd Macon, MO 63552-3145 Date(s) debt was incurred _____ Last 4 digits of account number 4491</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,542.00

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3.5	Nonpriority creditor's name and mailing address Agnes Hash 400 E Center St Kingsport, TN 37660-4804 Date(s) debt was incurred _____ Last 4 digits of account number <u>5282</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$848.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address Alan Aceves 1663 Pinot Pl Brentwood, CA 94513-4259 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address Alan Kennish 5013 5th Ave Key West, FL 33040-5731 Date(s) debt was incurred _____ Last 4 digits of account number <u>4769</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address Albert Weems 9695 Lazy S Rd Warrior, AL 35180-3019 Date(s) debt was incurred _____ Last 4 digits of account number <u>5253</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,660.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address Alexa Angell 109 Brennan Pl Greenville, SC 29609-6855 Date(s) debt was incurred _____ Last 4 digits of account number <u>4898</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,706.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address Alexis Gaspard PO Box 643 Marksville, LA 71351 Date(s) debt was incurred _____ Last 4 digits of account number <u>5085</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,800.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address Alexis Pope 514 Manchester Ln Byron, GA 31008-3865 Date(s) debt was incurred _____ Last 4 digits of account number <u>5340</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$160.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.12	Nonpriority creditor's name and mailing address Alice Jones 110 Bottino Dr Vicksburg, MS 39180-9721 Date(s) debt was incurred ____ Last 4 digits of account number 3064	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,754.78
3.13	Nonpriority creditor's name and mailing address Allison Hawk 7415 Compton Cir Cumming, GA 30040-7671 Date(s) debt was incurred ____ Last 4 digits of account number 4369	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
3.14	Nonpriority creditor's name and mailing address Alvin Bethea 839 Palafox St Flomaton, AL 36441-5415 Date(s) debt was incurred ____ Last 4 digits of account number 5152	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,670.00
3.15	Nonpriority creditor's name and mailing address Amanda Cameron 223 Millside Ct Commerce, GA 30529-7216 Date(s) debt was incurred ____ Last 4 digits of account number 5190	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.16	Nonpriority creditor's name and mailing address Amanda Dejohn 2821 Edgemont Ln Nederland, TX 77627-4624 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00
3.17	Nonpriority creditor's name and mailing address Amanda LaBarge 3990 Westchester Dr Orange, TX 77630-1040 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$611.00
3.18	Nonpriority creditor's name and mailing address Amanda Yarbrough 114 Wood Ridge Dr Nederland, TX 77627-9002 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$424.00

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3.19	<p>Nonpriority creditor's name and mailing address American Museum of Natural History</p> <p>200 Central Park W New York, NY 10024-5102</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$227.50</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.20	<p>Nonpriority creditor's name and mailing address Amy Dawson</p> <p>61 Barnes Ln Fremont, CA 94536-1689</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5049</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,161.40</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.21	<p>Nonpriority creditor's name and mailing address Amy Hall</p> <p>296 Forest Trl Marshall, TX 75672-1472</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4097</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,564.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.22	<p>Nonpriority creditor's name and mailing address Anamary Poehling</p> <p>261 Fountain Dr Glen Carbon, IL 62034</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5304</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,167.26</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.23	<p>Nonpriority creditor's name and mailing address Anastasia (Stacy) Alexander</p> <p>5209 Lick Skillet Rd Hamilton, GA 31811-3532</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4536</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,578.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.24	<p>Nonpriority creditor's name and mailing address Andrew Bronson</p> <p>9000 Glenistar Las Vegas, NV 89044</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5338</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.25	<p>Nonpriority creditor's name and mailing address Andrew Hanks</p> <p>208 Fox Trl Omro, WI 54963-1028</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4237</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$6,377.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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3.26	Nonpriority creditor's name and mailing address Andrew Thorrey Travel Expressions 806 26th Ave Vero Beach, FL 32960-3963 Date(s) debt was incurred ____ Last 4 digits of account number 3133	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61,210.90
3.27	Nonpriority creditor's name and mailing address Angela Miller 8785 Turkey Bluff Rd Navarre, FL 32566-2468 Date(s) debt was incurred ____ Last 4 digits of account number 5273	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,311.00
3.28	Nonpriority creditor's name and mailing address Angela Burke 422 13th Way Pleasant Grove, AL 35127-2605 Date(s) debt was incurred ____ Last 4 digits of account number 5019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.29	Nonpriority creditor's name and mailing address Angela Clark 3407 Rusack Dr Killeen, TX 76542-6408 Date(s) debt was incurred ____ Last 4 digits of account number 5340	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.00
3.30	Nonpriority creditor's name and mailing address Angela Holtzclaw 395 Red Bird Rd Spruce Pine, NC 28777-8708 Date(s) debt was incurred ____ Last 4 digits of account number 3589	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,200.00
3.31	Nonpriority creditor's name and mailing address Angela Olson Myers 31233 N 69th St Scottsdale, AZ 85266-3153 Date(s) debt was incurred ____ Last 4 digits of account number 5156	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$986.00
3.32	Nonpriority creditor's name and mailing address Angella Lebove 11843 Great Oaks Dr College Station, TX 77845-5073 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$492.00

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3.33 Nonpriority creditor's name and mailing address

Ann Heath**5136 Dahlia Dr
Plainfield, IN 46168-5716**

Date(s) debt was incurred _____

Last 4 digits of account number 3368As of the petition filing date, the claim is: *Check all that apply.* _____**\$550.00**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Customer prepayment or DepositIs the claim subject to offset? ☒ No ☐ Yes

3.34 Nonpriority creditor's name and mailing address

Ann Paulson**12949 W El Sueno Ct
Sun City West, AZ 85375-1533**

Date(s) debt was incurred _____

Last 4 digits of account number 4725As of the petition filing date, the claim is: *Check all that apply.* _____**\$538.00**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Customer prepayment or DepositIs the claim subject to offset? ☒ No ☐ Yes

3.35 Nonpriority creditor's name and mailing address

Anne Smith**1240 W Heidelberg Rd SW
Corydon, IN 47112-5239**

Date(s) debt was incurred _____

Last 4 digits of account number 5381As of the petition filing date, the claim is: *Check all that apply.* _____**\$6,846.00**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Customer prepayment or DepositIs the claim subject to offset? ☒ No ☐ Yes

3.36 Nonpriority creditor's name and mailing address

Annette Langley**381 James Hill Cir
Hoover, AL 35216**

Date(s) debt was incurred _____

Last 4 digits of account number 5169As of the petition filing date, the claim is: *Check all that apply.* _____**\$2,111.00**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Customer prepayment or DepositIs the claim subject to offset? ☒ No ☐ Yes

3.37 Nonpriority creditor's name and mailing address

Annie Locke**2729 21st Ave N
Texas City, TX 77590-4815**

Date(s) debt was incurred _____

Last 4 digits of account number 4947As of the petition filing date, the claim is: *Check all that apply.* _____**\$3,525.00**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Customer prepayment or DepositIs the claim subject to offset? ☒ No ☐ Yes

3.38 Nonpriority creditor's name and mailing address

Annisa Houseman**610 Morgan St
Chapin, IL 62628-2036**

Date(s) debt was incurred _____

Last 4 digits of account number 5379As of the petition filing date, the claim is: *Check all that apply.* _____**\$1,889.00**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Customer prepayment or DepositIs the claim subject to offset? ☒ No ☐ Yes

3.39 Nonpriority creditor's name and mailing address

Antoinette Hale**3929 San Remo Dr
Jacksonville, FL 32217-4644**

Date(s) debt was incurred _____

Last 4 digits of account number 5330As of the petition filing date, the claim is: *Check all that apply.* _____**\$1,558.00**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Customer prepayment or DepositIs the claim subject to offset? ☒ No ☐ Yes

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3.40	Nonpriority creditor's name and mailing address April Hicks 2845 Azalea Bluff Dr Cumming, GA 30041-3209 Date(s) debt was incurred ____ Last 4 digits of account number 4369	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.41	Nonpriority creditor's name and mailing address April Johnson 140 Sparrow Ln Jefferson, GA 30549-7230 Date(s) debt was incurred ____ Last 4 digits of account number 5190	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,625.00
3.42	Nonpriority creditor's name and mailing address Aptum Peer 1 / SERVERBEACH 106 Jefferson St San Antonio, TX 78205-1005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,159.85
3.43	Nonpriority creditor's name and mailing address Arnette Cowan 229 Liberty Star Rd Wendell, NC 27591-6876 Date(s) debt was incurred ____ Last 4 digits of account number 5351	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$57.00
3.44	Nonpriority creditor's name and mailing address Ashley Peltier 1999 Summerville Ln Orange, TX 77630-2330 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$424.00
3.45	Nonpriority creditor's name and mailing address Audra R McKenzie 1330 John Rosser Rd Sanford, NC 27332-6477 Date(s) debt was incurred ____ Last 4 digits of account number 5228	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,405.58
3.46	Nonpriority creditor's name and mailing address B. ANTIQUENE NICHOLS 2773 Stan Summers Rd Hallsville, TX 75650-4651 Date(s) debt was incurred ____ Last 4 digits of account number 4097	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,596.00

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3.47	Nonpriority creditor's name and mailing address Barbara Orr 3592 Haystack Dr Carson City, NV 89705-8018 Date(s) debt was incurred _____ Last 4 digits of account number <u>5059</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,845.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48	Nonpriority creditor's name and mailing address Barbara Chow 1723 Veneto Ln Brentwood, CA 94513-5278 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49	Nonpriority creditor's name and mailing address Barbara Lehr 215 Longmont St Hallsville, TX 75650-5124 Date(s) debt was incurred _____ Last 4 digits of account number <u>4097</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,128.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50	Nonpriority creditor's name and mailing address Barbara Roadcap 8192 Satches Ln Bridgewater, VA 22812-3318 Date(s) debt was incurred _____ Last 4 digits of account number <u>5061</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,277.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.51	Nonpriority creditor's name and mailing address Barbara Sanderson 233 Wiltshire Dr Montgomery, AL 36117-6067 Date(s) debt was incurred _____ Last 4 digits of account number <u>5032</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$856.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	Nonpriority creditor's name and mailing address Barbara Snider 5265 Stockton Pass Trussville, AL 35173-2513 Date(s) debt was incurred _____ Last 4 digits of account number <u>5275</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$669.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.53	Nonpriority creditor's name and mailing address Barby Gohringer 1606 Laird St Key West, FL 33040-5312 Date(s) debt was incurred _____ Last 4 digits of account number <u>4769</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$500.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

3.54	Nonpriority creditor's name and mailing address Barry Tenenbaum 178 N Pioneer Ave Shavertown, PA 18708 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	unknown
3.55	Nonpriority creditor's name and mailing address Be Our Guest Travel Company " 45 Brookhaven Rd Pinehurst, NC 28374-7086 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$609.90
3.56	Nonpriority creditor's name and mailing address Becky Dodd 1080 Gary Ln Fallon, NV 89406-3624 Date(s) debt was incurred _____ Last 4 digits of account number <u>5358</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,669.00
3.57	Nonpriority creditor's name and mailing address Belinda Stivers 2366 Port Royal Rd Campbellsburg, KY 40011-7408 Date(s) debt was incurred _____ Last 4 digits of account number <u>5266</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,902.00
3.58	Nonpriority creditor's name and mailing address Ben's Kosher Deli "Attn: Accounts Receivable 209 W 38th St New York, NY 10018-4405 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35.98
3.59	Nonpriority creditor's name and mailing address Berenda ODUM 2254 Grangeway Rd Marshall, TX 75672-5064 Date(s) debt was incurred <u>194097</u> Last 4 digits of account number <u>4097</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,143.00
3.60	Nonpriority creditor's name and mailing address Betsy Sheerin 490 Cedar Brg Schertz, TX 78154-3640 Date(s) debt was incurred _____ Last 4 digits of account number <u>5254</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,102.30

Debtor **New York City Vacations, Inc.**
Name

Case number (if known)

3.61	Nonpriority creditor's name and mailing address Betty Oshiro 1528 Symphony Cir Brentwood, CA 94513-4263 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
3.62	Nonpriority creditor's name and mailing address Betty Rubenstein 1550 Johnson St Key West, FL 33040-4928 Date(s) debt was incurred ____ Last 4 digits of account number 4769	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.63	Nonpriority creditor's name and mailing address Beverly Faldmo 163 W 950 N Farmington, UT 84025-3715 Date(s) debt was incurred ____ Last 4 digits of account number 3406	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.64	Nonpriority creditor's name and mailing address Beverly Johnson 1300 George Gregg St Marshall, TX 75670-1586 Date(s) debt was incurred ____ Last 4 digits of account number 4097	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.65	Nonpriority creditor's name and mailing address Bill Powell 7609 Riverview Kno Ct Clemmons, NC 27012 Date(s) debt was incurred ____ Last 4 digits of account number 5289	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,129.14
3.66	Nonpriority creditor's name and mailing address Bobbie May 22292 Highway 42 Livingston, LA 70754-4243 Date(s) debt was incurred ____ Last 4 digits of account number 9345	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$465.00
3.67	Nonpriority creditor's name and mailing address Bobby Abigando 104 Nestricks Dr Madison, AL 35756-3994 Date(s) debt was incurred ____ Last 4 digits of account number 4369	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00

Name

3.68	Nonpriority creditor's name and mailing address Bodnar Sales and Service 204 W Front St Berwick, PA 18603-4704 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$119.78 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.69	Nonpriority creditor's name and mailing address Bonita Vize 7165 Belle Fountain Blvd Middleton, WI 53562 Date(s) debt was incurred _____ Last 4 digits of account number <u>5265</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,592.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.70	Nonpriority creditor's name and mailing address Bonnie Kegley PO Box 758 Eagle River, WI 54521 Date(s) debt was incurred _____ Last 4 digits of account number <u>5291</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.71	Nonpriority creditor's name and mailing address Bonnie Newman 2040 N 1100th Ave Lynn Center, IL 61262-9545 Date(s) debt was incurred _____ Last 4 digits of account number <u>4172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$45.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72	Nonpriority creditor's name and mailing address Bradley Owens 125 Forestdale Dr Gaffney, SC 29341-2625 Date(s) debt was incurred _____ Last 4 digits of account number <u>5297</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$458.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73	Nonpriority creditor's name and mailing address Brady Chapman 609 Honeyflower Loop Bradenton, FL 34212-5003 Date(s) debt was incurred _____ Last 4 digits of account number <u>4882</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,830.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74	Nonpriority creditor's name and mailing address Brandi Diggs 944 E Silva St Long Beach, CA 90807-1033 Date(s) debt was incurred _____ Last 4 digits of account number <u>5065</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,495.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Name

3.75	<p>Nonpriority creditor's name and mailing address Brandy Colunga</p> <p>185 Potomac Dr Bridge City, TX 77611-3752</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5175</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.76	<p>Nonpriority creditor's name and mailing address Brenda Anthony</p> <p>8025 NW 72nd St Tamarac, FL 33321-2744</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5224</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,196.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.77	<p>Nonpriority creditor's name and mailing address Brenda Lee</p> <p>216 Riverwalk Blvd Saint Johns, FL 32259-8624</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4172</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,665.50</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.78	<p>Nonpriority creditor's name and mailing address Brenda Tamplin</p> <p>455 W Walton Rd Lumberton, TX 77657-7419</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5175</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$474.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.79	<p>Nonpriority creditor's name and mailing address Brian Brown</p> <p>401 Maddox Simpson Pkwy Lebanon, TN 37090-5347</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5014</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30,224.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.80	<p>Nonpriority creditor's name and mailing address Brian Beach</p> <p>8705 S Dana Orange, TX 77632-8229</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5175</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$150.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.81	<p>Nonpriority creditor's name and mailing address Brian Brady</p> <p>114 Overhill Dr Salisbury, NC 28144-7549</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4281</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,671.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.82	Nonpriority creditor's name and mailing address Brian Musselman 441 Red Hill Rd Pequea, PA 17565-9726 Date(s) debt was incurred _____ Last 4 digits of account number <u>4828</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,328.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.83	Nonpriority creditor's name and mailing address Brian Person 904 Eisenhower Ave Jasper, IN 47546-3804 Date(s) debt was incurred _____ Last 4 digits of account number <u>5264</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,394.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.84	Nonpriority creditor's name and mailing address Briana Page 2108 S 7th St Temple, TX 76504-7319 Date(s) debt was incurred _____ Last 4 digits of account number <u>5006</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,689.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.85	Nonpriority creditor's name and mailing address Bridgett LeJunie 117 S 16th St Nederland, TX 77627 Date(s) debt was incurred _____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$424.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.86	Nonpriority creditor's name and mailing address Bridgette Alford 8874 Stone Heritage Rd Middlesex, NC 27557-9249 Date(s) debt was incurred _____ Last 4 digits of account number <u>5288</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,736.14</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.87	Nonpriority creditor's name and mailing address Brittany Spires 101 Iron Horse Rd Lexington, SC 29073-6983 Date(s) debt was incurred _____ Last 4 digits of account number <u>5111</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,504.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.88	Nonpriority creditor's name and mailing address Bruce Charles Baird 1751 Chardonnay Ct Brentwood, CA 94513-4265 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$300.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

3.89	<p>Nonpriority creditor's name and mailing address</p> <p>Bufkin Frazier Must Love Travel 2046 Tr3405 Eaton Rd Vero Beach, FL 32960-0927</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5050</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,981.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.90	<p>Nonpriority creditor's name and mailing address</p> <p>Burma Cardwell</p> <p>127 Dundee Dr Carthage, NC 28327-9592</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5055</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$200.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.91	<p>Nonpriority creditor's name and mailing address</p> <p>Byron George Barclay</p> <p>1584 California Trl Brentwood, CA 94513-4337</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5027</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$300.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.92	<p>Nonpriority creditor's name and mailing address</p> <p>Candy Webb</p> <p>3706 Dax Ln Bridgeton, MO 63044-3507</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5342</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,232.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.93	<p>Nonpriority creditor's name and mailing address</p> <p>Carla Porterfield</p> <p>3730 Slater St Cumming, GA 30041-1902</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5327</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$207.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.94	<p>Nonpriority creditor's name and mailing address</p> <p>Carla Adams</p> <p>301 Lamplighter Ln Birmingham, AL 35214-6601</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4521</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$300.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.95	<p>Nonpriority creditor's name and mailing address</p> <p>Carmen Valley/Odyssey Travel</p> <p>800 Honeysuckle Rd Dothan, AL 36305-1158</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4945</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$182.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.96	<p>Nonpriority creditor's name and mailing address</p> <p>Carol Lion</p> <p>508 Berwick Rd S Syracuse, NY 13208-3209</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5092</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,727.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.97	<p>Nonpriority creditor's name and mailing address</p> <p>Carol Magill</p> <p>3600 SW Randolph Sq Topeka, KS 66611-3001</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5352</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,290.50</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.98	<p>Nonpriority creditor's name and mailing address</p> <p>Carol Yates</p> <p>3343 Eastview Dr Shingle Springs, CA 95682-9531</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5159</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,755.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.99	<p>Nonpriority creditor's name and mailing address</p> <p>Carol Phillips</p> <p>620 Frances St Key West, FL 33040-7181</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4769</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$250.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.100	<p>Nonpriority creditor's name and mailing address</p> <p>Carol Smith</p> <p>21 N Idlewild Ave Mundelein, IL 60060-2035</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5034</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$870.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.101	<p>Nonpriority creditor's name and mailing address</p> <p>Carol Stopher</p> <p>7010 Peartree Ln Fort Wayne, IN 46825-3741</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5294</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,846.38</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.102	<p>Nonpriority creditor's name and mailing address</p> <p>Carolyn Varner</p> <p>534 Lake Pointe Ln Madison, MS 39110-8752</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5204</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,530.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.103	<p>Nonpriority creditor's name and mailing address Carroll McCain</p> <p>5970 Gladys Ave Beaumont, TX 77706-4410</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5175</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.104	<p>Nonpriority creditor's name and mailing address Catharine Skidmore</p> <p>336 Sunset Dr Athens, GA 30606-2850</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5590</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$250.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.105	<p>Nonpriority creditor's name and mailing address Cathy Woodbury</p> <p>1230 Heather Dr Murphys, CA 95247-9687</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4336</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$143.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.106	<p>Nonpriority creditor's name and mailing address Cathy Rohrer</p> <p>5147 Silverbell Dr Plainfield, IN 46168-5706</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3368</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$450.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.107	<p>Nonpriority creditor's name and mailing address Chareese Cherry</p> <p>2606 Ballentine Blvd Norfolk, VA 23509-2304</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4786</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$250.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.108	<p>Nonpriority creditor's name and mailing address Charles Knabus, Jr</p> <p>1310 Roberts St Vidor, TX 77662-3555</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5313</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$7,011.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.109	<p>Nonpriority creditor's name and mailing address Charles Mecklin Jr</p> <p>87 Old Mill Ct Carrollton, GA 30117-4247</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5031</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,124.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor **New York City Vacations, Inc.**
Name

Case number (if known)

3.110	Nonpriority creditor's name and mailing address Charlotte Ann Grabill 1626 Gamay Ln Brentwood, CA 94513-4332 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.111	Nonpriority creditor's name and mailing address Chelcie Barnett 131 Dorothy Dr Nederland, TX 77627-3113 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$237.00
3.112	Nonpriority creditor's name and mailing address Cheryl Lentz 9961 Foxrun Rd Santa Ana, CA 92705-6103 Date(s) debt was incurred ____ Last 4 digits of account number 5270	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Deposit or Prepayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,708.00
3.113	Nonpriority creditor's name and mailing address Cheryl Lentz 9961 Foxrun Rd Santa Ana, CA 92705-6103 Date(s) debt was incurred ____ Last 4 digits of account number 5270	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,708.00
3.114	Nonpriority creditor's name and mailing address Cheryl McCaslin 2601 Addison Ave Scottsbluff, NE 69361-1882 Date(s) debt was incurred ____ Last 4 digits of account number 4841	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,430.36
3.115	Nonpriority creditor's name and mailing address Chris Rigsby 324 Chisholm Trl Hallsville, TX 75650-7318 Date(s) debt was incurred ____ Last 4 digits of account number 4097	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,403.00
3.116	Nonpriority creditor's name and mailing address Christen Oganowski 3633 Newhouse Pl Greenwood, IN 46143-9461 Date(s) debt was incurred ____ Last 4 digits of account number 4327	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,049.00

Name

3.117	<p>Nonpriority creditor's name and mailing address Christina Hanigan</p> <p>1801 Grandview Dr E Garden City, KS 67846-8493</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5007</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$11,947.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.118	<p>Nonpriority creditor's name and mailing address Christina Arrick</p> <p>422 13th Way Pleasant Grove, AL 35127-2605</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5019</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$312.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.119	<p>Nonpriority creditor's name and mailing address Christine Rich</p> <p>5060 Kirkwood Trl Titusville, FL 32780-6728</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5369</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,482.36</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.120	<p>Nonpriority creditor's name and mailing address Christino DeCarlo</p> <p>871 Coronado Dr Henderson, NV 89002</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5072</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,417.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.121	<p>Nonpriority creditor's name and mailing address Christopher Nunzir</p> <p>4579 Windcrest Dr Reno, NV 89523-9421</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5302</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,381.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.122	<p>Nonpriority creditor's name and mailing address Christopher Lynch</p> <p>215 N Center St Apt 502 San Antonio, TX 78202-2760</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5094</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,356.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.123	<p>Nonpriority creditor's name and mailing address Christy Adams</p> <p>6900 Ridge Rd Columbus, MS 39705-8270</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5178</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,037.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

3.124	<p>Nonpriority creditor's name and mailing address Cindy Bermes</p> <p>12408 Tanzanite Ct Fort Wayne, IN 46818-8541</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5294</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,846.38</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.125	<p>Nonpriority creditor's name and mailing address Cindy Smith</p> <p>303 Twelve Oaks Dr Warner Robins, GA 31088-2563</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5340</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$200.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.126	<p>Nonpriority creditor's name and mailing address Cindy Wall</p> <p>4170 Suwanee Bend Dr Suwanee, GA 30024-6460</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5099</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,478.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.127	<p>Nonpriority creditor's name and mailing address Circle Line Cruises(NY) "Pier 83 W 42nd St New York, NY 10036-8004</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$162.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Vendor</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.128	<p>Nonpriority creditor's name and mailing address Clare Crawford</p> <p>1 Oak Grove Dr Belleville, IL 62221-2535</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3781</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,498.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.129	<p>Nonpriority creditor's name and mailing address Claudia Robinette</p> <p>349 Cognac Rd Marston, NC 28363-8505</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5172</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,160.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.130	<p>Nonpriority creditor's name and mailing address Cleve Williams</p> <p>507 3rd Ave Jasper, IN 47546-3504</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5142</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$405.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

3.131	Nonpriority creditor's name and mailing address Colleen Clasen 11108 Laverham Ct Bakersfield, CA 93312-7017 Date(s) debt was incurred _____ Last 4 digits of account number <u>4330</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,710.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.132	Nonpriority creditor's name and mailing address Colleen Freking 511 12th St Heron Lake, MN 56137-4020 Date(s) debt was incurred _____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,340.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.133	Nonpriority creditor's name and mailing address Colleen Price 45 Bridgetown Rd Hilton Head Island, SC 29928-3365 Date(s) debt was incurred _____ Last 4 digits of account number <u>5328</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,694.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.134	Nonpriority creditor's name and mailing address Comcast - Xfinity - Barry's PO Box 70219 Philadelphia, PA 19176-0219 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$255.05</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.135	Nonpriority creditor's name and mailing address Connie Rupp 217 Pin Oak Dr Baytown, TX 77520-1214 Date(s) debt was incurred _____ Last 4 digits of account number <u>5246</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,495.76</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.136	Nonpriority creditor's name and mailing address Connie Conover 5083 Silverbell Dr Plainfield, IN 46168-5737 Date(s) debt was incurred _____ Last 4 digits of account number <u>3368</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$450.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.137	Nonpriority creditor's name and mailing address Connie Lindsey 10323 Sweetgum Ln Lumberton, TX 77657-5505 Date(s) debt was incurred _____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$524.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

	Debtor New York City Vacations, Inc.	Case number (if known) _____
	Name _____	

3.138	Nonpriority creditor's name and mailing address Constance Waddle PO Box 235 Bakersfield, CA 93302 Date(s) debt was incurred _____ Last 4 digits of account number 5190	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$792.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.139	Nonpriority creditor's name and mailing address Cori Convertito 281 Front St Key West, FL 33040-8313 Date(s) debt was incurred _____ Last 4 digits of account number 4769	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,750.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140	Nonpriority creditor's name and mailing address Corrie Case 8783 Randall Dr Fishers, IN 46038-1080 Date(s) debt was incurred _____ Last 4 digits of account number 4369	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.141	Nonpriority creditor's name and mailing address Courtyard Manhattan Times Square South 114 W 40th St New York, NY 10018-2699 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$303.06 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.142	Nonpriority creditor's name and mailing address Cristie Thomas 5468 Old Carthage Rd Carthage, NC 28327 Date(s) debt was incurred _____ Last 4 digits of account number 5055	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$200.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.143	Nonpriority creditor's name and mailing address Crowne Plaza Times Square Manhattan 1605 Broadway New York, NY 10019-7406 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,810.59 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.144	Nonpriority creditor's name and mailing address Cruise Planners (Coral Springs) 3111 N University Dr Ste 800 Coral Springs, FL 33065-5099 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$542.03 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.145	<p>Nonpriority creditor's name and mailing address Cruises and Tours Unlimited</p> <p>9125 Phillips Hwy Jacksonville, FL 32099</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$257.22</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.146	<p>Nonpriority creditor's name and mailing address Crystal Wilbers</p> <p>904 Ashridge Ct Erlanger, KY 41018-2981</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5194</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,807.14</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.147	<p>Nonpriority creditor's name and mailing address Crystal Hanks</p> <p>PO BOX 164 Excel, AL 36439</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5271</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,018.14</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.148	<p>Nonpriority creditor's name and mailing address Cynthia Perrone</p> <p>260 N Tropical Trl Merritt Island, FL 32953-4800</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4888</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$600.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.149	<p>Nonpriority creditor's name and mailing address Cynthia Smith</p> <p>3033 Heritage Lakes Dr Hilliard, OH 43026</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5162</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,215.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.150	<p>Nonpriority creditor's name and mailing address Cynthia A. McAdams</p> <p>PO Box 33365 San Diego, CA 92163</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4439</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$39,784.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.151	<p>Nonpriority creditor's name and mailing address Cynthia Hill</p> <p>1969 Sunset Point Rd Ste 16 Clearwater Beach, FL 33765-1145</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4117</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$250.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

	Debtor New York City Vacations, Inc.	Case number (if known) _____
	Name _____	

3.152	Nonpriority creditor's name and mailing address Cynthia Rigbsy 324 Chisholm Trl Hallsville, TX 75650-7318 Date(s) debt was incurred _____ Last 4 digits of account number 4097	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$150.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.153	Nonpriority creditor's name and mailing address Cynthia Sieve 24296 190th St Reading, MN 56165-2101 Date(s) debt was incurred _____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,788.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.154	Nonpriority creditor's name and mailing address Cynthia Welborn 211 Nix Way Warner Robins, GA 31093-2333 Date(s) debt was incurred _____ Last 4 digits of account number 5340	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$160.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.155	Nonpriority creditor's name and mailing address Cynthia Zimmerman 1673 Gamay Ln Brentwood, CA 94513-4330 Date(s) debt was incurred _____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.156	Nonpriority creditor's name and mailing address Cynthia Zulkosky 630 Anne Ct Delano, MN 55328-4509 Date(s) debt was incurred _____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,340.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.157	Nonpriority creditor's name and mailing address Dacia Griffin 8340 Lake Powell Dr Nederland, TX 77627-5655 Date(s) debt was incurred _____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$356.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.158	Nonpriority creditor's name and mailing address Dale Clarken 300 Boardwalk Dr Fort Collins, CO 80525-3070 Date(s) debt was incurred _____ Last 4 digits of account number 5074	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,220.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	New York City Vacations, Inc. <small>Name</small>	Case number (if known)	
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3.159	Nonpriority creditor's name and mailing address Dan Shenberger 12173 Pine St Felton, PA 17322-8402 Date(s) debt was incurred ____ Last 4 digits of account number <u>5213</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$905.00
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3.160	Nonpriority creditor's name and mailing address Dana Adams 103 South Dr Covington, LA 70433-4813 Date(s) debt was incurred ____ Last 4 digits of account number <u>4977</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,970.00
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3.161	Nonpriority creditor's name and mailing address Dana Dooley 37522 Copperstone Dr Sterling Heights, MI 48312-4806 Date(s) debt was incurred ____ Last 4 digits of account number <u>5357</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,306.07
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3.162	Nonpriority creditor's name and mailing address Dana Roycroft 2002 Gum Springs Rd Longview, TX 75602-7123 Date(s) debt was incurred ____ Last 4 digits of account number <u>4097</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,596.00
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3.163	Nonpriority creditor's name and mailing address Daniel Costello 7919 Carnell Ln Lenexa, KS 66062 Date(s) debt was incurred ____ Last 4 digits of account number <u>2390</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,186.00
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3.164	Nonpriority creditor's name and mailing address Daniel Siegrist 394 Cinder Rd New Providence, PA 17560-9513 Date(s) debt was incurred ____ Last 4 digits of account number <u>4822</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,303.00
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3.165	Nonpriority creditor's name and mailing address Danielle Badgett 7635 Superior Dr Nederland, TX 77627-5666 Date(s) debt was incurred ____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$849.00
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Name

3.166	<p>Nonpriority creditor's name and mailing address Daphne LeaHemmer</p> <p>32 Keiffer Rd Shrewsbury, VT 05738-9591</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5299</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,543.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.167	<p>Nonpriority creditor's name and mailing address David Daub</p> <p>60 Narcissus Ln Levittown, PA 19054-3402</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3665</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,468.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.168	<p>Nonpriority creditor's name and mailing address David Griffin</p> <p>16 Woods Edge Dr Gorham, ME 04038-2765</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5130</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,812.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.169	<p>Nonpriority creditor's name and mailing address David Schoewe</p> <p>2808 S 22nd St Rogers, AR 72758-6135</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5384</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,537.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.170	<p>Nonpriority creditor's name and mailing address David Mays</p> <p>1736 Latour Ave Brentwood, CA 94513-4333</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5027</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.171	<p>Nonpriority creditor's name and mailing address Dawn Paulson</p> <p>763 Riesgraf Rd Carver, MN 55315-4522</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5189</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,810.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.172	<p>Nonpriority creditor's name and mailing address Dawn Weathersbee</p> <p>1016 Bookie Richardson Rd Chapin, SC 29036-9142</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5135</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,108.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.173	<p>Nonpriority creditor's name and mailing address Dawn C Meelberg</p> <p>41274 Poplar Dr Emily, MN 56447-3018</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5003</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$500.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.174	<p>Nonpriority creditor's name and mailing address Dawn Meelberg</p> <p>41274 Poplar Dr Emily, MN 56447-3018</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5003</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,417.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.175	<p>Nonpriority creditor's name and mailing address Dayne Crumpler</p> <p>131 Harris Ave Raeford, NC 28376</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5216</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,250.14</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.176	<p>Nonpriority creditor's name and mailing address Debbie Sparks</p> <p>8 Sunset Canyon Ln Santa Fe, NM 87508-1454</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5175</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,600.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.177	<p>Nonpriority creditor's name and mailing address Deborah Carrico</p> <p>2505 Littlebrook Trl Owensboro, KY 42303-2188</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3777</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,117.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.178	<p>Nonpriority creditor's name and mailing address Deborah Guilbeaux</p> <p>6664 Guy Ln Orange, TX 77632-3901</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5175</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,250.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.179	<p>Nonpriority creditor's name and mailing address Deborah Lynn Wiener</p> <p>5830 Las Positas Rd Livermore, CA 94551-7800</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5027</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$200.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

3.180	Nonpriority creditor's name and mailing address Deborah Madsen 925 W Branch St Princeton, MN 55371-1553 Date(s) debt was incurred _____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,074.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.181	Nonpriority creditor's name and mailing address Debra Balliram-Manohalal 9868 Woolworth Ct Wellington, FL 33414-6463 Date(s) debt was incurred _____ Last 4 digits of account number <u>5124</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,167.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.182	Nonpriority creditor's name and mailing address Debra Callahan 763 Kenowood Dr Port Orange, FL 32129-4266 Date(s) debt was incurred _____ Last 4 digits of account number <u>5356</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$118.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.183	Nonpriority creditor's name and mailing address Debra Freeman 1910 Tupelo Trl Holt, MI 48842-1557 Date(s) debt was incurred _____ Last 4 digits of account number <u>4963</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,259.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.184	Nonpriority creditor's name and mailing address Debra Keithley 1503 Hawthorn Dr Macon, MO 63552-2244 Date(s) debt was incurred _____ Last 4 digits of account number <u>4491</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,323.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.185	Nonpriority creditor's name and mailing address Debra Rand 30 Fairchild Way Greenville, SC 29607-5569 Date(s) debt was incurred _____ Last 4 digits of account number <u>5071</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,676.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.186	Nonpriority creditor's name and mailing address Debra Rice 11770 20 Mile Rd NE Cedar Springs, MI 49319-9742 Date(s) debt was incurred _____ Last 4 digits of account number <u>5191</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$769.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Name

3.187	Nonpriority creditor's name and mailing address Debra Joiner 6108 Highway 613 Lucedale, MS 39452-3160 Date(s) debt was incurred _____ Last 4 digits of account number 5315	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,900.14 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.188	Nonpriority creditor's name and mailing address Debra Lange 4896 Lilium Dr Plainfield, IN 46168-5739 Date(s) debt was incurred _____ Last 4 digits of account number 3368	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$450.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.189	Nonpriority creditor's name and mailing address Delana Ludlow 5048 Lilium Dr Plainfield, IN 46168-5701 Date(s) debt was incurred _____ Last 4 digits of account number 3368	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$450.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.190	Nonpriority creditor's name and mailing address Delmar Riesterer 14086 Saint Andrews Dr Valders, WI 54245-9556 Date(s) debt was incurred _____ Last 4 digits of account number 5118	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,985.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.191	Nonpriority creditor's name and mailing address Delta Trudel 2142 SE Abcor Rd Port Saint Lucie, FL 34952-5650 Date(s) debt was incurred _____ Last 4 digits of account number 5366	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$228.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.192	Nonpriority creditor's name and mailing address Denise Noel 101 Heron Dr Kathleen, GA 31047-2534 Date(s) debt was incurred _____ Last 4 digits of account number 5340	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$160.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.193	Nonpriority creditor's name and mailing address Dennis Bachtel 1516 Miwok Ct Brentwood, CA 94513-4343 Date(s) debt was incurred _____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.194	Nonpriority creditor's name and mailing address Dennis Beaver 1207 Whitehead St Key West, FL 33040-7526 Date(s) debt was incurred _____ Last 4 digits of account number <u>4769</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$500.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.195	Nonpriority creditor's name and mailing address Dennis Frese 1593 California Trl Brentwood, CA 94513-4337 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.196	Nonpriority creditor's name and mailing address Derek Osburn 4403 88th St Lubbock, TX 79424-4201 Date(s) debt was incurred _____ Last 4 digits of account number <u>4481</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,249.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.197	Nonpriority creditor's name and mailing address Diana Oakley Gifted Travel Network 425 E Statesville Ave Mooreville, NC 28115-2533 Date(s) debt was incurred _____ Last 4 digits of account number <u>5205</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,330.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.198	Nonpriority creditor's name and mailing address Diane Kirchner 707 N Columbia Ave Fulda, MN 56131-1144 Date(s) debt was incurred _____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,340.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.199	Nonpriority creditor's name and mailing address Diane Tatman 9225 Shadbush Cir Centerville, OH 45458-5912 Date(s) debt was incurred _____ Last 4 digits of account number <u>5230</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$874.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>V</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.200	Nonpriority creditor's name and mailing address Don Shumock 448 Highland Ave Monroeville, AL 36460-2114 Date(s) debt was incurred _____ Last 4 digits of account number <u>5271</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,614.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.201	Nonpriority creditor's name and mailing address Donald Steffen 26799 Pepperwood Dr Woodhaven, MI 48183-4466 Date(s) debt was incurred _____ Last 4 digits of account number <u>5080</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,572.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.202	Nonpriority creditor's name and mailing address Donald Neff 49 Ridgefield Dr Lancaster, PA 17602-6107 Date(s) debt was incurred _____ Last 4 digits of account number <u>4824</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,328.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.203	Nonpriority creditor's name and mailing address Donna Bradley 121 Pelican Point Ln Bohannon, VA 23021-2008 Date(s) debt was incurred _____ Last 4 digits of account number <u>5242</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,505.14 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.204	Nonpriority creditor's name and mailing address Donna Spencer 1808 Chrisco Rd W Seagrove, NC 27341-7447 Date(s) debt was incurred _____ Last 4 digits of account number <u>5055</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$200.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.205	Nonpriority creditor's name and mailing address Donna Terry Hollimon 425 County Road 325 Moulton, AL 35650-8043 Date(s) debt was incurred _____ Last 4 digits of account number <u>4217</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,975.54 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.206	Nonpriority creditor's name and mailing address Dwight Monroe 1609 Harmony Ln Tuscaloosa, AL 35406-1930 Date(s) debt was incurred _____ Last 4 digits of account number <u>5212</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,972.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.207	Nonpriority creditor's name and mailing address Ed Fritch 1831 Withrow Rd Greensboro, GA 30642-2553 Date(s) debt was incurred _____ Last 4 digits of account number <u>5190</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$600.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.208	Nonpriority creditor's name and mailing address Edana L Nail 602 W Hill St Fulton, MS 38843-1022 Date(s) debt was incurred _____ Last 4 digits of account number <u>5256</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,650.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.209	Nonpriority creditor's name and mailing address Edana L Nail 602 W Hill St Fulton, MS 38843-1022 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,330.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.210	Nonpriority creditor's name and mailing address Eden Gilley 601 Rock Forge Ct Jefferson, GA 30549-6443 Date(s) debt was incurred _____ Last 4 digits of account number <u>5190</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$600.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.211	Nonpriority creditor's name and mailing address Edward Mattiuz 11370 Hickory Woods Dr Fishers, IN 46038-1887 Date(s) debt was incurred _____ Last 4 digits of account number <u>4584</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,495.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.212	Nonpriority creditor's name and mailing address Edward Pressnell 1748 Chardonnay Ct Brentwood, CA 94513-4265 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.213	Nonpriority creditor's name and mailing address Economy Travel Services 2403 S 4th Street Sable Palm Plz Fort Pierce, FL 34945 Date(s) debt was incurred _____ Last 4 digits of account number <u>5366</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,197.54 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.214	Nonpriority creditor's name and mailing address Elaine Obershaw 20055 Hoya Ct Lakeville, MN 55044-6829 Date(s) debt was incurred _____ Last 4 digits of account number <u>3056</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$930.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	New York City Vacations, Inc. <small>Name</small>	Case number (if known)	
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3.215	Nonpriority creditor's name and mailing address Eleanor Smith 604 Rolling Acres Dr Kathleen, GA 31047-1608 Date(s) debt was incurred ____ Last 4 digits of account number <u>5340</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.00
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3.216	Nonpriority creditor's name and mailing address Elizabeth Spence 5134 Old Hickory Cir Marianna, FL 32446-0149 Date(s) debt was incurred ____ Last 4 digits of account number <u>5088</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,000.00
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3.217	Nonpriority creditor's name and mailing address Elizabeth Chamberlain 1418 Pine St Key West, FL 33040-7245 Date(s) debt was incurred ____ Last 4 digits of account number <u>4769</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
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3.218	Nonpriority creditor's name and mailing address Elizabeth Hisaw 919 Taylor Ave Godfrey, IL 62035-2537 Date(s) debt was incurred ____ Last 4 digits of account number <u>5255</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,827.00
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3.219	Nonpriority creditor's name and mailing address Elizabeth Joy 1401 Country Club Rd N Saint Petersburg, FL 33710-4428 Date(s) debt was incurred ____ Last 4 digits of account number <u>4369</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
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3.220	Nonpriority creditor's name and mailing address Elizabeth M Hoppe 6005 W Wisconsin Ave Wauwatosa, WI 53213-4182 Date(s) debt was incurred ____ Last 4 digits of account number <u>3670</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,470.00
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3.221	Nonpriority creditor's name and mailing address Elizabeth McCoy 25523 Shafer Rd Thebes, IL 62990-2141 Date(s) debt was incurred ____ Last 4 digits of account number <u>5312</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$561.00
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Debtor	New York City Vacations, Inc. <small>Name</small>	Case number (if known)	
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3.222	Nonpriority creditor's name and mailing address Elizabeth Odello 5468 Ruthwood Dr Calabasas, CA 91302-1048 Date(s) debt was incurred ____ Last 4 digits of account number <u>5332</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,116.00
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3.223	Nonpriority creditor's name and mailing address Elizabeth Russell 1923 W Parkside Ave Burbank, CA 91506-2910 Date(s) debt was incurred ____ Last 4 digits of account number <u>5091</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,208.00
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3.224	Nonpriority creditor's name and mailing address Elizabeth Simon 25859 160th St NW Big Lake, MN 55309-8571 Date(s) debt was incurred ____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$959.00
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3.225	Nonpriority creditor's name and mailing address Ella Crawford 7060 N Thorne Ave Fresno, CA 93650-1073 Date(s) debt was incurred ____ Last 4 digits of account number <u>5034</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$870.00
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3.226	Nonpriority creditor's name and mailing address Ellen Stein 3912 Royal Oak Dr Birmingham, AL 35243-5930 Date(s) debt was incurred ____ Last 4 digits of account number <u>5144</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,136.50
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3.227	Nonpriority creditor's name and mailing address Ellice Smart 8060 Frankford Rd Apt 106 Dallas, TX 75252-6872 Date(s) debt was incurred ____ Last 4 digits of account number <u>3693</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,067.00
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3.228	Nonpriority creditor's name and mailing address Emily Brown 353 Hanna St Medina, TN 38355-8712 Date(s) debt was incurred ____ Last 4 digits of account number <u>4369</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
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Name

3.229	Nonpriority creditor's name and mailing address Emma Starr 1616 Catherine St Key West, FL 33040-3532 Date(s) debt was incurred _____ Last 4 digits of account number <u>4769</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.230	Nonpriority creditor's name and mailing address Empire State Realty Observatory TRS LLC PO Box 21078 New York, NY 10087-1078 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,204.75 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.231	Nonpriority creditor's name and mailing address Ensemble Travel Group 56 W 38th St Fl 11 New York, NY 10018-6203 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$397.51 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.232	Nonpriority creditor's name and mailing address Eric Bartels 347 Columbo Cir Orlando, FL 32804-6301 Date(s) debt was incurred _____ Last 4 digits of account number <u>5078</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,073.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.233	Nonpriority creditor's name and mailing address Erica March 6289 Fieldbrook Cir Mc Calla, AL 35111 Date(s) debt was incurred _____ Last 4 digits of account number <u>5019</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$324.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.234	Nonpriority creditor's name and mailing address Ernestine Brown 3320 Cliff Rd S Apt 12 Birmingham, AL 35205-1555 Date(s) debt was incurred _____ Last 4 digits of account number <u>5019</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$904.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.235	Nonpriority creditor's name and mailing address Felicia Anderson 5809 Cheshire Cove Trl Mc Calla, AL 35111 Date(s) debt was incurred _____ Last 4 digits of account number <u>5019</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$170.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **New York City Vacations, Inc.**
Name

Case number (if known)

3.236	Nonpriority creditor's name and mailing address Felicia Frost 6201 Dayburst Way Sacramento, CA 95823-6101 Date(s) debt was incurred ____ Last 4 digits of account number 5032	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$870.00
3.237	Nonpriority creditor's name and mailing address Felicia Thompson 709 70th Pl S Birmingham, AL 35206-5402 Date(s) debt was incurred ____ Last 4 digits of account number 5019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$598.00
3.238	Nonpriority creditor's name and mailing address Fran Decker 600 Elizabeth St Key West, FL 33040-6823 Date(s) debt was incurred ____ Last 4 digits of account number 4769	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.239	Nonpriority creditor's name and mailing address Frances Morrow 3837 Rue Left Bank Alexandria, LA 71303-4160 Date(s) debt was incurred ____ Last 4 digits of account number 5347	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,666.20
3.240	Nonpriority creditor's name and mailing address Frances Shipper 1157 Kestrel Way Salisbury, MD 21804-9328 Date(s) debt was incurred ____ Last 4 digits of account number 4972	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: V Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,686.00
3.241	Nonpriority creditor's name and mailing address Frances Kelly 1577 California Trl Brentwood, CA 94513-4337 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15.00
3.242	Nonpriority creditor's name and mailing address Francis Morton 7999 Honeysuckle Ln West Chester, OH 45069-2458 Date(s) debt was incurred ____ Last 4 digits of account number 5287	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,979.00

Name

3.243	<p>Nonpriority creditor's name and mailing address Frank Werhun</p> <p>207 Willow Rd Pittston, PA 18640-3759</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5238</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$477.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.244	<p>Nonpriority creditor's name and mailing address Frankie Miller</p> <p>2607 Thorndale Pl Dothan, AL 36303-1513</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5286</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,200.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.245	<p>Nonpriority creditor's name and mailing address Fred Almade</p> <p>1237 SW Addie St Port Saint Lucie, FL 34983-2403</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5321</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,650.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.246	<p>Nonpriority creditor's name and mailing address Frontier</p> <p>PO Box 740407 Cincinnati, OH 45274-0407</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$70.85</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.247	<p>Nonpriority creditor's name and mailing address Gary Krakowski</p> <p>21121 Kenmare Dr Shorewood, IL 60404-8194</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5387</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,654.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.248	<p>Nonpriority creditor's name and mailing address Geauxing Places</p> <p>112 Hummell St Denham Springs, LA 70726-3418</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3064</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$800.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.249	<p>Nonpriority creditor's name and mailing address Gema Sweeney</p> <p>3409 Chapel Creek Cir Wesley Chapel, FL 33544-7705</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4840</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,826.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.250	<p>Nonpriority creditor's name and mailing address Gennie Perry</p> <p>12 Alex Ln Hattiesburg, MS 39402-3680</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4323</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$716.25</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.251	<p>Nonpriority creditor's name and mailing address Geoffry Landis</p> <p>210 S Main St Goshen, IN 46526-3723</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5316</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$640.14</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.252	<p>Nonpriority creditor's name and mailing address Gerald Gray</p> <p>1614 Zinfandel Dr Brentwood, CA 94513-4338</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5027</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$300.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.253	<p>Nonpriority creditor's name and mailing address Gerald Schwarzauer</p> <p>516 Camelot Way Opelika, AL 36801-2500</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5272</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$10,840.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.254	<p>Nonpriority creditor's name and mailing address Gina Guess</p> <p>71 E 3rd St Tuscumbia, AL 35674</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5026</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,600.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.255	<p>Nonpriority creditor's name and mailing address Gina Marsiglio</p> <p>4105 Amaryllis Dr Plainfield, IN 46168-5708</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3368</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,400.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.256	<p>Nonpriority creditor's name and mailing address Ginger Fulton</p> <p>2144 Roscoe Rd Newnan, GA 30263-4003</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5263</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,232.05</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor **New York City Vacations, Inc.**
Name

Case number (if known)

3.257	Nonpriority creditor's name and mailing address Gisele Jones PO Box 582891 Elk Grove, CA 95758 Date(s) debt was incurred ____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$116.00
3.258	Nonpriority creditor's name and mailing address Giselle Gibbs PO Box 582891 Elk Grove, CA 95758 Date(s) debt was incurred ____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,044.00
3.259	Nonpriority creditor's name and mailing address Giselle Jones PO Box 582891 Elk Grove, CA 95758 Date(s) debt was incurred ____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,740.00
3.260	Nonpriority creditor's name and mailing address Glenda Frye 3831 Old Forest Rd Lynchburg, VA 24501-6955 Date(s) debt was incurred ____ Last 4 digits of account number 5134	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
3.261	Nonpriority creditor's name and mailing address Gracie Hancock 402 E Lomax Dr Longview, TX 75603-9635 Date(s) debt was incurred ____ Last 4 digits of account number 4097	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$320.00
3.262	Nonpriority creditor's name and mailing address Graciella Boltiansky 432 N Palm Dr Apt 409 Beverly Hills, CA 90210-3944 Date(s) debt was incurred ____ Last 4 digits of account number 4845	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,618.00
3.263	Nonpriority creditor's name and mailing address Greg Holestin 454 Peace Haven Dr Norfolk, VA 23502-5716 Date(s) debt was incurred ____ Last 4 digits of account number 5370	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,370.00

	Debtor New York City Vacations, Inc.	Case number (if known) _____
	Name _____	

3.264	Nonpriority creditor's name and mailing address Gregory Cobbler 6932 Medical Center Rd Axton, VA 24054-2940 Date(s) debt was incurred _____ Last 4 digits of account number 5259	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,764.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>V</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.265	Nonpriority creditor's name and mailing address Gregory Plaisance 188 E 85th St Cut Off, LA 70345-3822 Date(s) debt was incurred _____ Last 4 digits of account number 4861	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,353.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.266	Nonpriority creditor's name and mailing address Gregory R Phillips 1324 S College Ave Tulsa, OK 74104-4816 Date(s) debt was incurred _____ Last 4 digits of account number 5284	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,730.28 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.267	Nonpriority creditor's name and mailing address Gretchen Garner-Easter 24 Pebble River Cir Sacramento, CA 95831-2979 Date(s) debt was incurred _____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.268	Nonpriority creditor's name and mailing address Gwedolyn Lewis 26248 Glenmare St Highland, CA 92346-1632 Date(s) debt was incurred _____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$870.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.269	Nonpriority creditor's name and mailing address Gwendolyn Boutte PO BOX 112 Slidell, LA 70459 Date(s) debt was incurred _____ Last 4 digits of account number 5125	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,985.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.270	Nonpriority creditor's name and mailing address Harvest Builders Center 2007 Elberta Rd Warner Robins, GA 31093-1352 Date(s) debt was incurred _____ Last 4 digits of account number 5340	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$480.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Name

3.271	Nonpriority creditor's name and mailing address Heather Rice 374 W 6th Ave Columbus, OH 43201-3135 Date(s) debt was incurred _____ Last 4 digits of account number <u>5154</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$8,555.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.272	Nonpriority creditor's name and mailing address Heather VanKleeck 8304 Hampton Cir E Indianapolis, IN 46256-9777 Date(s) debt was incurred _____ Last 4 digits of account number <u>5364</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,746.14</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.273	Nonpriority creditor's name and mailing address Heather N Witt 27985 Jaguar St Macon, MO 63552-4331 Date(s) debt was incurred _____ Last 4 digits of account number <u>4491</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,542.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.274	Nonpriority creditor's name and mailing address Heidi Hershberger 2313 Highway 82 Statham, GA 30666 Date(s) debt was incurred _____ Last 4 digits of account number <u>5190</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$600.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.275	Nonpriority creditor's name and mailing address Holly Lowder 229 Liberty Star Rd Wendell, NC 27591-6876 Date(s) debt was incurred _____ Last 4 digits of account number <u>5351</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,930.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.276	Nonpriority creditor's name and mailing address Holly Robertson 28814 Stone Ridge Ct Waterford, WI 53185-5609 Date(s) debt was incurred _____ Last 4 digits of account number <u>5239</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,250.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.277	Nonpriority creditor's name and mailing address Holly Salk 12189 282nd Ave NW Zimmerman, MN 55398-4671 Date(s) debt was incurred _____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$955.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Name

3.278	<p>Nonpriority creditor's name and mailing address Holly Seales</p> <p>5782 S State Highway 605 Dothan, AL 36301-6512</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4369</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.279	<p>Nonpriority creditor's name and mailing address Hunt Bascom</p> <p>1549 Symphony Cir Brentwood, CA 94513-4263</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5027</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$100.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.280	<p>Nonpriority creditor's name and mailing address Ina Tabak</p> <p>2118 Solera St Brentwood, CA 94513-6482</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5027</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.281	<p>Nonpriority creditor's name and mailing address InteleTravel.com</p> <p>777 E Atlantic Ave Ste 300 Delray Beach, FL 33483-5352</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$98.28</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.282	<p>Nonpriority creditor's name and mailing address Iva Moore</p> <p>4675 FM 2587 Wildorado, TX 79098-6206</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5311</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,179.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.283	<p>Nonpriority creditor's name and mailing address J Espitia Espinosa</p> <p>4916 Lumley Rd Durham, NC 27703-5867</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5309</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$10,219.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.284	<p>Nonpriority creditor's name and mailing address J. Brett Bettis</p> <p>5959 Valley Way Trussville, AL 35173-2877</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5151</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,559.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

3.285 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$312.00**
Jacqueline Ligon
☐ Contingent
☐ Unliquidated
☐ Disputed
2012 Hollins Dr
Birmingham, AL 35205-6354
Basis for the claim: Customer prepayment or Deposit
 Date(s) debt was incurred _____
 Is the claim subject to offset? ☒ No ☐ Yes
 Last 4 digits of account number 5019

3.286 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$200.00**
Jacquelyn Pepper
☐ Contingent
☐ Unliquidated
☐ Disputed
1943 Burgundy Ln
Brentwood, CA 94513-6479
Basis for the claim: Customer prepayment or Deposit
 Date(s) debt was incurred _____
 Is the claim subject to offset? ☒ No ☐ Yes
 Last 4 digits of account number 5027

3.287 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$538.00**
Jaime Briseno
☐ Contingent
☐ Unliquidated
☐ Disputed
3183 Normington Dr
Sacramento, CA 95833-1248
Basis for the claim: Customer prepayment or Deposit
 Date(s) debt was incurred _____
 Is the claim subject to offset? ☒ No ☐ Yes
 Last 4 digits of account number 4408

3.288 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$250.00**
Jaime Laino
☐ Contingent
☐ Unliquidated
☐ Disputed
PO Box 908
Key West, FL 33041
Basis for the claim: _____
 Date(s) debt was incurred _____
 Is the claim subject to offset? ☒ No ☐ Yes
 Last 4 digits of account number 4769

3.289 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$1,445.00**
Jamenia Duncan
☐ Contingent
☐ Unliquidated
☐ Disputed
1631 Vista View Dr
Montgomery, AL 36110-3219
Basis for the claim: Customer prepayment or Deposit
 Date(s) debt was incurred _____
 Is the claim subject to offset? ☒ No ☐ Yes
 Last 4 digits of account number 5350

3.290 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$924.05**
James Douglas Nichols
☐ Contingent
☐ Unliquidated
☐ Disputed
10948 Alandale Way
Rancho Cordova, CA 95670-5133
Basis for the claim: Customer prepayment or Deposit
 Date(s) debt was incurred _____
 Is the claim subject to offset? ☒ No ☐ Yes
 Last 4 digits of account number 5226

3.291 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$300.00**
James Rego
☐ Contingent
☐ Unliquidated
☐ Disputed
1635 Gamay Ln
Brentwood, CA 94513-4331
Basis for the claim: Customer prepayment or Deposit
 Date(s) debt was incurred _____
 Is the claim subject to offset? ☒ No ☐ Yes
 Last 4 digits of account number 5027

Name

3.292	Nonpriority creditor's name and mailing address Jamie Green 539 Autumn Ridge Ln Lafayette, TN 37083-3680 Date(s) debt was incurred _____ Last 4 digits of account number <u>5053</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$994.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.293	Nonpriority creditor's name and mailing address Jamita Stepna 8534 Alpine Vineyards Ct Las Vegas, NV 89139-6818 Date(s) debt was incurred _____ Last 4 digits of account number <u>5338</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.294	Nonpriority creditor's name and mailing address Jane Goldsmith 17 Brackett Ln # B Hudson, NH 03051-3276 Date(s) debt was incurred _____ Last 4 digits of account number <u>5137</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,738.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.295	Nonpriority creditor's name and mailing address Jane Reed 121 Pelican Point Ln Bohannon, VA 23021-2008 Date(s) debt was incurred _____ Last 4 digits of account number <u>5244</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$18,497.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.296	Nonpriority creditor's name and mailing address Jane Grannis 620 Mickens Ln Key West, FL 33040-6533 Date(s) debt was incurred _____ Last 4 digits of account number <u>4769</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.297	Nonpriority creditor's name and mailing address Jane Schaible 4301 SW 56th Ct Topeka, KS 66610-9453 Date(s) debt was incurred _____ Last 4 digits of account number <u>5352</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,290.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.298	Nonpriority creditor's name and mailing address Janet Joslyn 3278 Twilight Ct Baldwinsville, NY 13027-4247 Date(s) debt was incurred _____ Last 4 digits of account number <u>5278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,827.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

3.299	Nonpriority creditor's name and mailing address janet Ruffin 1622 14th Ave N Bessemer, AL 35020-4672 Date(s) debt was incurred _____ Last 4 digits of account number <u>4521</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.300	Nonpriority creditor's name and mailing address Janette Weber 2025 Hilltop Dr Redding, CA 96002-0209 Date(s) debt was incurred _____ Last 4 digits of account number <u>5086</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.301	Nonpriority creditor's name and mailing address Janice Harmon 498 Morning Star Blvd Ephrata, WA 98823-3004 Date(s) debt was incurred _____ Last 4 digits of account number <u>5223</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,352.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.302	Nonpriority creditor's name and mailing address Jason Luna 221 S Paloma Show Low, AZ 85901-3604 Date(s) debt was incurred _____ Last 4 digits of account number <u>5069</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.303	Nonpriority creditor's name and mailing address Jason Dollar 606 Buddys Ln Mc Calla, AL 35111 Date(s) debt was incurred _____ Last 4 digits of account number <u>5053</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,473.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.304	Nonpriority creditor's name and mailing address Jay Griggs 3114 S Philadelphia St Amarillo, TX 79103-4510 Date(s) debt was incurred _____ Last 4 digits of account number <u>5266</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,290.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.305	Nonpriority creditor's name and mailing address Jayawnah Bailey 5916 Bullboat Ct North Las Vegas, NV 89031-3489 Date(s) debt was incurred _____ Last 4 digits of account number <u>5338</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **New York City Vacations, Inc.**
Name

Case number (if known)

3.306	Nonpriority creditor's name and mailing address Jean Johnston 4404 Nailor Rd Vicksburg, MS 39180-8953 Date(s) debt was incurred ____ Last 4 digits of account number 3064	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,486.72
3.307	Nonpriority creditor's name and mailing address Jean Marie Salay 1660 Gamay Ln Brentwood, CA 94513-4330 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.308	Nonpriority creditor's name and mailing address Jeanette Douglas PO BOX 4144 Camp Connell, CA 95223 Date(s) debt was incurred ____ Last 4 digits of account number 4334	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$143.00
3.309	Nonpriority creditor's name and mailing address Jeanette Fonte 1148 Aurora Ave Metairie, LA 70005-1504 Date(s) debt was incurred ____ Last 4 digits of account number 5367	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,155.30
3.310	Nonpriority creditor's name and mailing address Jeanette Dizaar 709 24th Ave NW Birmingham, AL 35215-3049 Date(s) debt was incurred ____ Last 4 digits of account number 4521	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.311	Nonpriority creditor's name and mailing address Jeanne Qualen 11210 County 77 SW Nisswa, MN 56468-2014 Date(s) debt was incurred ____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,340.00
3.312	Nonpriority creditor's name and mailing address Jeff Couch 1591 New Deal Potts Rd Portland, TN 37148-4606 Date(s) debt was incurred ____ Last 4 digits of account number 4887	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,332.50

Name

3.313	Nonpriority creditor's name and mailing address Jeff Meyer 1501 N Ashland Ave De Pere, WI 54115 Date(s) debt was incurred _____ Last 4 digits of account number <u>5170</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,596.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.314	Nonpriority creditor's name and mailing address Jeff Ratliff 560 Ervin Coker Rd NE Rome, GA 30161-9621 Date(s) debt was incurred _____ Last 4 digits of account number <u>5249</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,839.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.315	Nonpriority creditor's name and mailing address Jenifer Breaux 15210 Fishhawk Preserve Dr Lithia, FL 33547-1734 Date(s) debt was incurred _____ Last 4 digits of account number <u>5250</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.316	Nonpriority creditor's name and mailing address Jenna Wolfe 529 Macbeth Dr Pittsburgh, PA 15235-4611 Date(s) debt was incurred _____ Last 4 digits of account number <u>4689</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,427.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.317	Nonpriority creditor's name and mailing address Jennie Larson 1100 Forrest Glenn Dr Arkansas City, KS 67005-4122 Date(s) debt was incurred _____ Last 4 digits of account number <u>5004</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,009.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.318	Nonpriority creditor's name and mailing address Jennifer Fischer 3590 Parfet St Wheat Ridge, CO 80033-5426 Date(s) debt was incurred _____ Last 4 digits of account number <u>5131</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,440.30 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.319	Nonpriority creditor's name and mailing address Jennifer Brown 1171 Stagg Run Trl Pelham, AL 35124-3265 Date(s) debt was incurred _____ Last 4 digits of account number <u>5053</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

3.320	Nonpriority creditor's name and mailing address Jennifer Dolezal 94 Bailey Park Ct Jefferson, GA 30549-7109 Date(s) debt was incurred _____ Last 4 digits of account number <u>5190</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,700.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.321	Nonpriority creditor's name and mailing address Jennifer Lovejoy 228 Millstone Trl Jefferson, GA 30549-6978 Date(s) debt was incurred _____ Last 4 digits of account number <u>5190</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$300.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.322	Nonpriority creditor's name and mailing address Jennifer Meadows 6318 Lickton Pike Goodlettsville, TN 37072-9151 Date(s) debt was incurred _____ Last 4 digits of account number <u>5236</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,944.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.323	Nonpriority creditor's name and mailing address Jennifer Missildine 120 Brigadoon Dr Madison, AL 35757-8735 Date(s) debt was incurred _____ Last 4 digits of account number <u>4369</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$100.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.324	Nonpriority creditor's name and mailing address Jerald Jensen 1470 Santa Clara View Dr Santa Clara, UT 84765-5719 Date(s) debt was incurred _____ Last 4 digits of account number <u>5219</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,970.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.325	Nonpriority creditor's name and mailing address Jeremy Hershberger PO BOX 981 Jefferson, GA 30549 Date(s) debt was incurred _____ Last 4 digits of account number <u>5190</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$600.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.326	Nonpriority creditor's name and mailing address Jessica Vincent 3147 Norris Ln Orange, TX 77632-8479 Date(s) debt was incurred _____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,550.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	New York City Vacations, Inc. <small>Name</small>	Case number (if known)	
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3.327	Nonpriority creditor's name and mailing address Jill Bartler 500 Burlington Cir Apt 204 Wheeling, IL 60090-4115 Date(s) debt was incurred ____ Last 4 digits of account number <u>5252</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,414.00
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3.328	Nonpriority creditor's name and mailing address Jill Bowen 560 Acorn Ridge Rd Dawson, IL 62520-3352 Date(s) debt was incurred ____ Last 4 digits of account number <u>5274</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,879.20
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3.329	Nonpriority creditor's name and mailing address Jimmie Anne 3600 N Milton Rd Fort Pierce, FL 34946-1909 Date(s) debt was incurred ____ Last 4 digits of account number <u>5149</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,762.00
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3.330	Nonpriority creditor's name and mailing address Jo Nell Rowell 680 Ridgewood Dr Port Neches, TX 77651-6107 Date(s) debt was incurred ____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00
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3.331	Nonpriority creditor's name and mailing address Joan Drury 9277 State Hwy N Scott City, MO 63780-9235 Date(s) debt was incurred ____ Last 4 digits of account number <u>5083</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,120.00
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3.332	Nonpriority creditor's name and mailing address Joanie Waldron 6550 Riverbend Dr Trussville, AL 35173-1512 Date(s) debt was incurred ____ Last 4 digits of account number <u>5262</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$978.50
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3.333	Nonpriority creditor's name and mailing address JoAnn Calegari 1946 Burgundy Ln Brentwood, CA 94513-6479 Date(s) debt was incurred ____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
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Name

3.334	Nonpriority creditor's name and mailing address Joanne Masters 109 Riverhill Ct Cayce, SC 29033-4376 Date(s) debt was incurred _____ Last 4 digits of account number <u>5028</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,954.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.335	Nonpriority creditor's name and mailing address Jodie Baacke 2052 S 84th St West Allis, WI 53227-1704 Date(s) debt was incurred _____ Last 4 digits of account number <u>4188</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.336	Nonpriority creditor's name and mailing address Joel Cohen / BROADWAY INBOUND TICKET 38 Grandville Dr Swoyersville, PA 18704-1239 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,160.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.337	Nonpriority creditor's name and mailing address John Heaton 108 Pennsylvania Ave Lynchburg, VA 24502-4728 Date(s) debt was incurred _____ Last 4 digits of account number <u>5214</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,318.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.338	Nonpriority creditor's name and mailing address John Kennedy 1046 Gaston Manor Dr Durham, NC 27703-8964 Date(s) debt was incurred _____ Last 4 digits of account number <u>5292</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,488.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.339	Nonpriority creditor's name and mailing address John Lussier 208 Wimberly Way Bristol, TN 37620-7166 Date(s) debt was incurred _____ Last 4 digits of account number <u>5010</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,034.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.340	Nonpriority creditor's name and mailing address John Thomas 106 Phillips Ridge Dr Huntsville, AL 35801 Date(s) debt was incurred _____ Last 4 digits of account number <u>5375</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,505.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **New York City Vacations, Inc.**
Name

Case number (if known)

3.341	Nonpriority creditor's name and mailing address John Spellman 1920 Corporate Dr Ste 204 San Marcos, TX 78666-6283 Date(s) debt was incurred ____ Last 4 digits of account number 5075	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,215.70
3.342	Nonpriority creditor's name and mailing address JohnMorgan 2828 Old Hickory Blvd Apt 716 Nashville, TN 37221-3731 Date(s) debt was incurred ____ Last 4 digits of account number 5082	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,088.00
3.343	Nonpriority creditor's name and mailing address Johnnie Muncy PO Box 123 Corona, NM 88318 Date(s) debt was incurred ____ Last 4 digits of account number 5051	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,845.00
3.344	Nonpriority creditor's name and mailing address Jon Robinson 41225 Calle de Suenos Murrieta, CA 92562-7142 Date(s) debt was incurred ____ Last 4 digits of account number 5146	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,606.79
3.345	Nonpriority creditor's name and mailing address Jonathan Marshlian 9712 Mill Run Dr Great Falls, VA 22066-1815 Date(s) debt was incurred ____ Last 4 digits of account number 5283	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,452.00
3.346	Nonpriority creditor's name and mailing address Jonathan Peacock 430 Willow Point Dr Dublin, GA 31021-6461 Date(s) debt was incurred ____ Last 4 digits of account number 5121	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,900.00
3.347	Nonpriority creditor's name and mailing address Jonathan Shoemaker 515 Trailridge Cir Hallsville, TX 75650-5144 Date(s) debt was incurred ____ Last 4 digits of account number 4097	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$798.00

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3.348	Nonpriority creditor's name and mailing address Joseph and Lori Przybysz 13452 Route 78 South Wales, NY 14139-9717 Date(s) debt was incurred _____ Last 4 digits of account number <u>4914</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,558.00
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3.349	Nonpriority creditor's name and mailing address Joshua and Julie Matthews 2103 Hannah Dr Wentzville, MO 63385-4592 Date(s) debt was incurred _____ Last 4 digits of account number <u>4409</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,329.00
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3.350	Nonpriority creditor's name and mailing address Joy Jones 2288 Deaver Walker Rd Cleveland, AL 35049-5317 Date(s) debt was incurred _____ Last 4 digits of account number <u>5187</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$236.00
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3.351	Nonpriority creditor's name and mailing address Joyce Anderson 245 Oak Leaf Cir Pell City, AL 35125-9321 Date(s) debt was incurred _____ Last 4 digits of account number <u>5275</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,175.50
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3.352	Nonpriority creditor's name and mailing address Joyce Bono 2001 Maple Tree St Saint Peters, MO 63376-6717 Date(s) debt was incurred _____ Last 4 digits of account number <u>3368</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
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3.353	Nonpriority creditor's name and mailing address Joyce Cann 2573 E Caramillo St Colorado Springs, CO 80909-3071 Date(s) debt was incurred _____ Last 4 digits of account number <u>4282</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00
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3.354	Nonpriority creditor's name and mailing address Jude Armistead 3329 Woodward Dr Mobile, AL 36695-6502 Date(s) debt was incurred _____ Last 4 digits of account number <u>4853</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,502.00
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3.355	Nonpriority creditor's name and mailing address Judee Spansel 4527 Cleveland Pl Metairie, LA 70003-1245 Date(s) debt was incurred ____ Last 4 digits of account number 5220	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$938.00
3.356	Nonpriority creditor's name and mailing address Judith Kremer 304 8th St NE Fulda, MN 56131-9688 Date(s) debt was incurred ____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,680.00
3.357	Nonpriority creditor's name and mailing address Judith Rayburn 133 Crawford Dr Martin, TN 38237-3807 Date(s) debt was incurred ____ Last 4 digits of account number 4724	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,727.15
3.358	Nonpriority creditor's name and mailing address Judy Adams 109 Highgate Ln Lexington, NC 27292-5372 Date(s) debt was incurred ____ Last 4 digits of account number 5063	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$928.00
3.359	Nonpriority creditor's name and mailing address Judy Morgan 1619 Zinfandel Dr Brentwood, CA 94513-4338 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.360	Nonpriority creditor's name and mailing address Julie Baty 11771 Orchard Park Dr Sparta, MI 49345-8451 Date(s) debt was incurred ____ Last 4 digits of account number 5073	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,165.12
3.361	Nonpriority creditor's name and mailing address Julie Damigella 95 Gregory Rd Holliston, MA 01746-2516 Date(s) debt was incurred ____ Last 4 digits of account number 5025	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,494.00

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3.362	Nonpriority creditor's name and mailing address Julie Jolley 4441 Parkwood Cir Trussville, AL 35173-1526 Date(s) debt was incurred _____ Last 4 digits of account number 5275	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,032.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.363	Nonpriority creditor's name and mailing address Julie Hylwa 113 Candora Rd Maryville, TN 37804-3659 Date(s) debt was incurred _____ Last 4 digits of account number 5104	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,286.66 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.364	Nonpriority creditor's name and mailing address Julie Walker 9831 FM 365 Rd Beaumont, TX 77705-9325 Date(s) debt was incurred _____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.365	Nonpriority creditor's name and mailing address Justin Gibbs 5217 Escondido Pass # Ass McAllen, TX 78504-9001 Date(s) debt was incurred _____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,740.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.366	Nonpriority creditor's name and mailing address Justine Bartoloni 3471 Colby Chase Dr Apex, NC 27539-9068 Date(s) debt was incurred _____ Last 4 digits of account number 5041	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,847.14 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.367	Nonpriority creditor's name and mailing address Kailey Labove 11843 Great Oaks Dr College Station, TX 77845-5073 Date(s) debt was incurred _____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$187.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.368	Nonpriority creditor's name and mailing address Karalynn Cromeens 8431 Katy Fwy Houston, TX 77024-1931 Date(s) debt was incurred _____ Last 4 digits of account number 5127	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$14,657.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Deposit or Prepayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.369	Nonpriority creditor's name and mailing address Karen Anderson 2425 Forest Primeval Rd Saint Germain, WI 54558-9714 Date(s) debt was incurred ____ Last 4 digits of account number 5291	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.370	Nonpriority creditor's name and mailing address Karen George 1204 Old Crows Way Springfield, IL 62712-8669 Date(s) debt was incurred ____ Last 4 digits of account number 5335	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,834.00
3.371	Nonpriority creditor's name and mailing address Karen Murphy 2212 Concord Cir Harrisburg, PA 17110-9202 Date(s) debt was incurred ____ Last 4 digits of account number 5234	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,300.00
3.372	Nonpriority creditor's name and mailing address Karen Pollert 425 Lasher Dr Seymour, IN 47274-2213 Date(s) debt was incurred ____ Last 4 digits of account number 4879	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,308.00
3.373	Nonpriority creditor's name and mailing address Karen Gregory 2533 NW 58th St Oklahoma City, OK 73112-7102 Date(s) debt was incurred ____ Last 4 digits of account number 4394	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,674.00
3.374	Nonpriority creditor's name and mailing address Karen McLendon 6649 Greenwell St Pensacola, FL 32526-7931 Date(s) debt was incurred ____ Last 4 digits of account number 5361	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,780.00
3.375	Nonpriority creditor's name and mailing address Karen Moffett 136 Grimes St Roanoke, VA 24019-8435 Date(s) debt was incurred ____ Last 4 digits of account number 5383	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.376	Nonpriority creditor's name and mailing address Karina Conway 1804 Scarsdale Ct Lafayette, CO 80026-9166 Date(s) debt was incurred _____ Last 4 digits of account number <u>3390</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$16,210.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.377	Nonpriority creditor's name and mailing address Karla White 14531 Misty Meadow Ln Houston, TX 77079-3172 Date(s) debt was incurred _____ Last 4 digits of account number <u>3923</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,008.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.378	Nonpriority creditor's name and mailing address Karyne Coven 840 Mission Valley Ln Annapolis, MD 21401-7382 Date(s) debt was incurred _____ Last 4 digits of account number <u>5049</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,161.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.379	Nonpriority creditor's name and mailing address Kashawna Edwards 4747 W Waters Ave Apt 402 Tampa, FL 33614-1450 Date(s) debt was incurred _____ Last 4 digits of account number <u>5372</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$642.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.380	Nonpriority creditor's name and mailing address Katharine Wood 1855 N Tegner St Wickenburg, AZ 85390-2657 Date(s) debt was incurred _____ Last 4 digits of account number <u>5308</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,724.08 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.381	Nonpriority creditor's name and mailing address Katherine Parr 24100 Pratt Rd Armada, MI 48005-1545 Date(s) debt was incurred _____ Last 4 digits of account number <u>5129</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$56.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.382	Nonpriority creditor's name and mailing address Katherine Bares-Cochrun 9831 FM 365 Rd Beaumont, TX 77705-9325 Date(s) debt was incurred _____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.383	<p>Nonpriority creditor's name and mailing address Kathesia Thomas</p> <p>105 Laurel Woods Dr Warner Robins, GA 31088-9203</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5640</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$160.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.384	<p>Nonpriority creditor's name and mailing address Kathleen Heffernan</p> <p>PO BOX 4544 Camp Connell, CA 95223</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4333</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$143.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.385	<p>Nonpriority creditor's name and mailing address Kathleen Goss</p> <p>1 Box Elder Ln Willow Street, PA 17584-9605</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4825</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,328.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.386	<p>Nonpriority creditor's name and mailing address Kathleen Mathis</p> <p>2097 Rioja Way Brentwood, CA 94513-5289</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5027</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$300.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.387	<p>Nonpriority creditor's name and mailing address Kathleen Schober</p> <p>2010 Tempranillo Ln Brentwood, CA 94513-5290</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5027</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$300.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.388	<p>Nonpriority creditor's name and mailing address Kathryn Shaw</p> <p>1322 Trenton Ln Franklin, TN 37067-6407</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5306</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,475.07</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.389	<p>Nonpriority creditor's name and mailing address Kathy Barnes</p> <p>1604 Eagon Ct Fuquay Varina, NC 27526-9383</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4667</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$10,351.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

3.390	<p>Nonpriority creditor's name and mailing address Katie Adamczyk</p> <p>9612 Two and a Half Rd East Leroy, MI 49051</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5357</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,924.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.391	<p>Nonpriority creditor's name and mailing address Katie Snyder</p> <p>11909 286th Ave NW Princeton, MN 55371-4784</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5003</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.392	<p>Nonpriority creditor's name and mailing address Katie Swafford</p> <p>5136 Dahlia Dr Plainfield, IN 46168-5716</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3368</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.393	<p>Nonpriority creditor's name and mailing address Katie McGowan</p> <p>172 E Lakeview Dr Milledgeville, GA 31061</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5155</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$586.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.394	<p>Nonpriority creditor's name and mailing address Kay Clinton</p> <p>1273 Country Place Dr Houston, TX 77079-3123</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3923</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,351.12</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.395	<p>Nonpriority creditor's name and mailing address Kay Marie Carden</p> <p>1702 Zinfandel Dr Brentwood, CA 94513-4342</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5027</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.396	<p>Nonpriority creditor's name and mailing address Kaylene Nienhueser</p> <p>10521 Cary St La Vista, NE 68128-3248</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3316</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$25,866.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

3.397	<p>Nonpriority creditor's name and mailing address Kayron Smith</p> <p>2443 Stewarts Ferry Pike Hermitage, TN 37076-3926</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5353</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,578.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.398	<p>Nonpriority creditor's name and mailing address Keely Culpepper</p> <p>3309 Dunbrooke Dr Birmingham, AL 35243-4818</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5081</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$30.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.399	<p>Nonpriority creditor's name and mailing address Keith Kirkman</p> <p>2104 Surrey Ln Rock Hill, SC 29732-7302</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5208</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,854.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.400	<p>Nonpriority creditor's name and mailing address Keith Young</p> <p>308 Bluebonnet Dr Lafayette, LA 70508-5412</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5349</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,316.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.401	<p>Nonpriority creditor's name and mailing address Kelley Brown Lutz</p> <p>9 Colberts Ln Newport News, VA 23601-3115</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5157</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,777.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.402	<p>Nonpriority creditor's name and mailing address Kelly Ruml</p> <p>PO Box 807 South Wellfleet, MA 02663</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5116</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,285.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.403	<p>Nonpriority creditor's name and mailing address Kelly Johnson</p> <p>29665 442nd Ave Aitkin, MN 56431-4625</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5003</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$250.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.404	Nonpriority creditor's name and mailing address Kelly Moore 10234 SE Harrison St Portland, OR 97216-2914 Date(s) debt was incurred _____ Last 4 digits of account number <u>5200</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,950.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.405	Nonpriority creditor's name and mailing address Kenice Earleen Short 1630 Healing Rock Ct Brentwood, CA 94513-4264 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$150.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.406	Nonpriority creditor's name and mailing address Kenneth Gooden 8705 Witherbee Ct Lewisville, NC 27023-7749 Date(s) debt was incurred _____ Last 4 digits of account number <u>5005</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$170.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.407	Nonpriority creditor's name and mailing address Kenneth Furby 3165 Capitan Dr Port Neches, TX 77651-5803 Date(s) debt was incurred _____ Last 4 digits of account number <u>9175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.408	Nonpriority creditor's name and mailing address Kenneth Marion Gwin 2110 Solera St Brentwood, CA 94513-6482 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.409	Nonpriority creditor's name and mailing address Keri Collins 1407 N 22nd St Nederland, TX 77627-5737 Date(s) debt was incurred _____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.410	Nonpriority creditor's name and mailing address Keri Merchman 332 Honeysuckle Trl Hamilton, AL 35570-5234 Date(s) debt was incurred _____ Last 4 digits of account number <u>5045</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,694.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

	Debtor New York City Vacations, Inc.	Case number (if known) _____
	Name _____	

3.411	Nonpriority creditor's name and mailing address Kim Bastin-Myers 1400 Gloria Terrell Dr Wilder, KY 41076-9188 Date(s) debt was incurred _____ Last 4 digits of account number 5345	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,099.02 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.412	Nonpriority creditor's name and mailing address Kimberly Cagle 653 Vass Carthage Rd Carthage, NC 28327-9416 Date(s) debt was incurred _____ Last 4 digits of account number 5055	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$400.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.413	Nonpriority creditor's name and mailing address Kimberly Hodge 13713 Randa Pkwy Northport, AL 35475-3473 Date(s) debt was incurred _____ Last 4 digits of account number 4369	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.414	Nonpriority creditor's name and mailing address Kimberly Jump 14328 Misty Meadow Ln Houston, TX 77079-3185 Date(s) debt was incurred _____ Last 4 digits of account number 3923	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,008.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.415	Nonpriority creditor's name and mailing address Kory Wuenschal 6738 Hansen St Groves, TX 77619-5910 Date(s) debt was incurred _____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.416	Nonpriority creditor's name and mailing address Kristene Ruddle 8471 Southwestern Blvd Dallas, TX 75206-2243 Date(s) debt was incurred _____ Last 4 digits of account number 5285	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,762.66 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.417	Nonpriority creditor's name and mailing address Kristi Sackett 2127 280th St Mount Ayr, IA 50854-8964 Date(s) debt was incurred _____ Last 4 digits of account number 5093	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,533.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.418	Nonpriority creditor's name and mailing address Kristin Hanson 13219 Oakwood Rd Zimmerman, MN 55398-9331 Date(s) debt was incurred _____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$955.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.419	Nonpriority creditor's name and mailing address Kristine Coates PO Box 1835 Julian, CA 92036 Date(s) debt was incurred _____ Last 4 digits of account number <u>4700</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,120.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.420	Nonpriority creditor's name and mailing address LaJean Herman 1105 Fairway Dr Princeton, MN 55371-2242 Date(s) debt was incurred _____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,587.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.421	Nonpriority creditor's name and mailing address Larinda Rainwater 1825 E Nettleton Ave Ste H Jonesboro, AR 72401-5152 Date(s) debt was incurred _____ Last 4 digits of account number <u>4815</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,750.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.422	Nonpriority creditor's name and mailing address Larry Goddard 5255 Eastside Rd Redding, CA 96001-4271 Date(s) debt was incurred _____ Last 4 digits of account number <u>5106</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,834.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.423	Nonpriority creditor's name and mailing address Larry Lunsford 313 Camp Forrest Trl Helena, AL 35080-8622 Date(s) debt was incurred _____ Last 4 digits of account number <u>5143</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,690.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.424	Nonpriority creditor's name and mailing address Latasha Powell 329 Chapel Creek Way Fultondale, AL 35068-6036 Date(s) debt was incurred _____ Last 4 digits of account number <u>5019</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$786.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Name

3.425	<p>Nonpriority creditor's name and mailing address Latretta Morvant</p> <p>9831 FM 365 Rd Beaumont, TX 77705-9325</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5175</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$900.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.426	<p>Nonpriority creditor's name and mailing address Laura Rondot</p> <p>4312 Briarwood Rd Louisville, KY 40207-4038</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5298</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,434.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.427	<p>Nonpriority creditor's name and mailing address Laura F Tyree</p> <p>19129 Forest Rd Lynchburg, VA 24502-4487</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3841</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$40,530.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.428	<p>Nonpriority creditor's name and mailing address Laura Lequire</p> <p>1249 Butler Rd Maryville, TN 37804-2313</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5104</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,134.34</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.429	<p>Nonpriority creditor's name and mailing address Laura Perry</p> <p>PO Box 1360 Wimberley, TX 78676</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5218</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,406.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.430	<p>Nonpriority creditor's name and mailing address Lauren Brown</p> <p>2530 SW Longleaf Dr Pinehurst, NC 28374</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5055</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$200.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.431	<p>Nonpriority creditor's name and mailing address Lauren Malueg</p> <p>932 Edward Ave Jefferson, GA 30549-7295</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5190</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$600.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

3.432	<p>Nonpriority creditor's name and mailing address Lawrence Mcghee</p> <p>3 Brightleaf Ct Durham, NC 27713-9018</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4936</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,828.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.433	<p>Nonpriority creditor's name and mailing address LBAC Travel "</p> <p>1907 Julia Goldbach Ave Ronkonkoma, NY 11779-6416</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$158.30</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.434	<p>Nonpriority creditor's name and mailing address Leisure Pass Group, Inc.</p> <p>711 Atlantic Ave Fl 4 Boston, MA 02111-2809</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$262.40</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.435	<p>Nonpriority creditor's name and mailing address Lesa Wilson</p> <p>2296 Breland Rd Mathiston, MS 39752-4442</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4968</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$400.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.436	<p>Nonpriority creditor's name and mailing address Lesia Stuart</p> <p>310 Island Ave Chattanooga, TN 37405-4276</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5305</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,398.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.437	<p>Nonpriority creditor's name and mailing address Letrice Golden</p> <p>3083 Malcolm Ave Oakland, CA 94605-5349</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5034</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,370.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.438	<p>Nonpriority creditor's name and mailing address Lezli Madden</p> <p>16890 N River Shores Rd Northport, AL 35475-2519</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5153</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,019.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

3.439	<p>Nonpriority creditor's name and mailing address Like A Local Tours</p> <p>730 Lafayette Ave Apt 1R Brooklyn, NY 11221-6176</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$89.60</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.440	<p>Nonpriority creditor's name and mailing address Linda Brooks</p> <p>1810 Hiawatha Pl Ann Arbor, MI 48105-1235</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5090</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$800.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.441	<p>Nonpriority creditor's name and mailing address Linda Clarke</p> <p>146 Royster Dr Crawfordville, FL 32327-4626</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5100</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,281.43</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.442	<p>Nonpriority creditor's name and mailing address Linda Tassin</p> <p>107 Wakefield Dr Lafayette, LA 70503-4242</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5329</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,642.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.443	<p>Nonpriority creditor's name and mailing address Linda Williams</p> <p>1999 S Marion Ave Lake City, FL 32025-0003</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5371</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,400.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.444	<p>Nonpriority creditor's name and mailing address Linda Fields</p> <p>3115 Pennywell Ln Katy, TX 77494-4546</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3923</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,008.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.445	<p>Nonpriority creditor's name and mailing address Linda Marie Rhodes Parks</p> <p>1634 Healing Rock Ct Brentwood, CA 94513-4264</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5027</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$150.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.446	<p>Nonpriority creditor's name and mailing address</p> <p>Linda Ralston</p> <p>4946 Mimosa Dr Plainfield, IN 46168-5734</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3368</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$450.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.447	<p>Nonpriority creditor's name and mailing address</p> <p>Linda Schmoeller</p> <p>12111 Logan St Alton, IL 62002</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5255</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,397.14</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.448	<p>Nonpriority creditor's name and mailing address</p> <p>Lisa Baker</p> <p>715 Estates Rd SE Roanoke, VA 24014-4303</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5126</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,572.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.449	<p>Nonpriority creditor's name and mailing address</p> <p>Lisa Caloss</p> <p>121 Hawthorne Vale Ridgeland, MS 39157-2345</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>6096</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,858.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.450	<p>Nonpriority creditor's name and mailing address</p> <p>Lisa Simpson</p> <p>1349 Sunhaven Rd Alpine, CA 91901-2378</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4952</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,958.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.451	<p>Nonpriority creditor's name and mailing address</p> <p>Lisa Burud</p> <p>PO Box 21597 Bakersfield, CA 93390</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5193</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$824.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.452	<p>Nonpriority creditor's name and mailing address</p> <p>Liza Dozier</p> <p>PO Box 2754 Augusta, GA 30914</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5300</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,289.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

3.453	Nonpriority creditor's name and mailing address Lois Hamilton 2027 Elm St Quincy, IL 62301-3233 Date(s) debt was incurred _____ Last 4 digits of account number <u>4569</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,032.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.454	Nonpriority creditor's name and mailing address Lois Songer 1310 Newton St Key West, FL 33040-7026 Date(s) debt was incurred _____ Last 4 digits of account number <u>4769</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$250.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.455	Nonpriority creditor's name and mailing address Lorely Lopez 341 31st St Nacogdoches, TX 75964-8729 Date(s) debt was incurred _____ Last 4 digits of account number <u>5326</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$800.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.456	Nonpriority creditor's name and mailing address Lori Pelosi 619 Guernseytown Rd Watertown, CT 06795-1820 Date(s) debt was incurred _____ Last 4 digits of account number <u>5077</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,966.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.457	Nonpriority creditor's name and mailing address Lori Przybysz 1342 Route 78 South Wales, NY 14139 Date(s) debt was incurred _____ Last 4 digits of account number <u>4914</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$779.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.458	Nonpriority creditor's name and mailing address Lori Culotta 6040 Brookhill Cir Birmingham, AL 35242-3711 Date(s) debt was incurred _____ Last 4 digits of account number <u>4356</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,090.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.459	Nonpriority creditor's name and mailing address Lori Mandich PO Box 91 Seville, OH 44273 Date(s) debt was incurred _____ Last 4 digits of account number <u>4782</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,230.50</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.460	<p>Nonpriority creditor's name and mailing address Lorraine Crane</p> <p>22824 N Padaro Dr Sun City West, AZ 85375-1621</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5087</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,438.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.461	<p>Nonpriority creditor's name and mailing address Lotte New York Palace</p> <p>455 Madison Ave New York, NY 10022-6845</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,225.86</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Vendor</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.462	<p>Nonpriority creditor's name and mailing address Lula Waskom</p> <p>39 Buena Vista Dr Marshall, TX 75670-6603</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4097</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,564.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.463	<p>Nonpriority creditor's name and mailing address Luzie Maxwell Lewallen</p> <p>PO Box 3393 McAllen, TX 78502</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5115</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,578.50</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.464	<p>Nonpriority creditor's name and mailing address Lynda Anderson</p> <p>68393 Moonlight Dr Cathedral City, CA 92234-2105</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5269</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,826.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.465	<p>Nonpriority creditor's name and mailing address Lynda Strickland</p> <p>11559 Dunn Rd Dunn, NC 28334-5067</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4269</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,272.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.466	<p>Nonpriority creditor's name and mailing address Lynda Eason</p> <p>1519 Hibiscus Ave McAllen, TX 78501-3225</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5115</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,471.50</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

	Debtor New York City Vacations, Inc.	Case number (if known) _____
	Name _____	

3.467	Nonpriority creditor's name and mailing address Lynda Last 3670 Dam Ln Phelps, WI 54554-9499 Date(s) debt was incurred _____ Last 4 digits of account number 5291	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.468	Nonpriority creditor's name and mailing address Lynn Eubanks PO Box 260 O Brien, FL 32071 Date(s) debt was incurred _____ Last 4 digits of account number 4027	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,516.68 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.469	Nonpriority creditor's name and mailing address Lynne Brown 1 Foggy Field Ln Fredericksburg, VA 22406-8440 Date(s) debt was incurred _____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$870.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.470	Nonpriority creditor's name and mailing address Lynne Hickney / My Travel Agency 229 Russells Mills Rd Dartmouth, MA 02748-2022 Date(s) debt was incurred _____ Last 4 digits of account number 5359	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,840.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.471	Nonpriority creditor's name and mailing address M Shannan Fastzkie 13015 Old White Horse Rd Travelers Rest, SC 29690-7830 Date(s) debt was incurred _____ Last 4 digits of account number 5046	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,062.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.472	Nonpriority creditor's name and mailing address M. Teri Long 20 Inverness Cir Royersford, PA 19468-1545 Date(s) debt was incurred _____ Last 4 digits of account number 5221	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,817.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.473	Nonpriority creditor's name and mailing address Maccie Hardin 24151 Bella Dolce Ln Katy, TX 77494-7901 Date(s) debt was incurred _____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$350.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.474	<p>Nonpriority creditor's name and mailing address Machelle Crowley</p> <p>1628 W 400 S Peru, IN 46970-7924</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4564</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,221.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.475	<p>Nonpriority creditor's name and mailing address Madonna Barry</p> <p>9799 Josey St Beaumont, TX 77707-1016</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5175</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.476	<p>Nonpriority creditor's name and mailing address Magical Moments Vacations</p> <p>2447 Tiffin Ave # 196 Findlay, OH 45840-8672</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$521.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.477	<p>Nonpriority creditor's name and mailing address Magnolia Travel Group</p> <p>PO Box 1666 Madison, MS 39130-1666</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$77.24</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.478	<p>Nonpriority creditor's name and mailing address Makayla Burkett</p> <p>606 Milligan Dr Longview, TX 75604-3926</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4097</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$764.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.479	<p>Nonpriority creditor's name and mailing address Mandy Herman</p> <p>1933 Glenn Rd Gaston, SC 29053-9393</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5334</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,032.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.480	<p>Nonpriority creditor's name and mailing address Marbert Sise</p> <p>1614 Trinidad Dr Key West, FL 33040-5220</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4769</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$250.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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3.481	Nonpriority creditor's name and mailing address Marcia VanValkenburg 650 Main St NW Elk River, MN 55330-1503 Date(s) debt was incurred _____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,176.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.482	Nonpriority creditor's name and mailing address Margaret Bolejack PO Box 271 Pittsboro, NC 27312-0271 Date(s) debt was incurred _____ Last 4 digits of account number 5110	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,436.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.483	Nonpriority creditor's name and mailing address Margaret Hughes 1321 Mountain Ridge Rd Hickory, KY 42051-8954 Date(s) debt was incurred _____ Last 4 digits of account number 4724	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,727.13 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.484	Nonpriority creditor's name and mailing address Margaret Spearin 16479 W Rowel Rd Surprise, AZ 85387-6869 Date(s) debt was incurred _____ Last 4 digits of account number 5232	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,258.53 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.485	Nonpriority creditor's name and mailing address Marian Janet Sanchez 1841 Vallejo Way Sacramento, CA 95818-3840 Date(s) debt was incurred _____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$125.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.486	Nonpriority creditor's name and mailing address Marianne Schwarz 5 Knaves Ct Nottingham, MD 21236-2708 Date(s) debt was incurred _____ Last 4 digits of account number 5022	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$954.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.487	Nonpriority creditor's name and mailing address Marion Fulce Ambassador Travel 5250 Vogel Rd Evansville, IN 47715-7814 Date(s) debt was incurred _____ Last 4 digits of account number 5131	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,938.08 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.488	<p>Nonpriority creditor's name and mailing address Markel Helms</p> <p>2213 Croydon Dr Tallahassee, FL 32303-4305</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5231</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,310.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.489	<p>Nonpriority creditor's name and mailing address Market Street Partnership</p> <p>300 Market St Kingston, PA 18704-5426</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$6,497.54</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.490	<p>Nonpriority creditor's name and mailing address Marquis Johnson</p> <p>5949 E Christine Ave Fresno, CA 93727-6558</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5034</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$870.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.491	<p>Nonpriority creditor's name and mailing address Marriott Business Services Bank of America PO Box 402642 Atlanta, GA 30384-2642</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>8463</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$260,024.55</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.492	<p>Nonpriority creditor's name and mailing address Marriott Business Services Bank of America PO Box 402642 Atlanta, GA 30384-2642</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>0566</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$72,784.67</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.493	<p>Nonpriority creditor's name and mailing address Marriott Marquis Marriott Business Services PO Box 403003 Atlanta, GA 30384-3003</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,078.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.494	<p>Nonpriority creditor's name and mailing address Marsha Seldon</p> <p>103 Dewey St Warner Robins, GA 31093-2410</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5340</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$160.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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3.495	Nonpriority creditor's name and mailing address Marth Newsome 4721 Martha Ln Groves, TX 77619-5539 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$424.00
3.496	Nonpriority creditor's name and mailing address Martha Riggs 206 W Division St Dowagiac, MI 49047-1734 Date(s) debt was incurred ____ Last 4 digits of account number 4323	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$716.25
3.497	Nonpriority creditor's name and mailing address Martha Depoo 108 Front St Key West, FL 33040-8310 Date(s) debt was incurred ____ Last 4 digits of account number 4769	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.498	Nonpriority creditor's name and mailing address Martha Green 6745 Capitol St Groves, TX 77619-5905 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
3.499	Nonpriority creditor's name and mailing address Martha L. Taylor 7272 N Belvedere Ave Fresno, CA 93722-3407 Date(s) debt was incurred ____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$620.00
3.500	Nonpriority creditor's name and mailing address Martha Smart 14329 Still Meadow Dr Houston, TX 77079-3131 Date(s) debt was incurred ____ Last 4 digits of account number 3923	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,008.00
3.501	Nonpriority creditor's name and mailing address Martha Taylor 7272 N Belvedere Ave Fresno, CA 93722-3407 Date(s) debt was incurred ____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00

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3.502	Nonpriority creditor's name and mailing address Mary Hollenkamp 10590 Prairie Dr Breese, IL 62230 Date(s) debt was incurred _____ Last 4 digits of account number 5341	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,417.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.503	Nonpriority creditor's name and mailing address Mary Allen 740 Kings Mountain Rd Tuscaloosa, AL 35406-2732 Date(s) debt was incurred _____ Last 4 digits of account number 4369	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.504	Nonpriority creditor's name and mailing address Mary Archer 9706 Harrowgate Dr Houston, TX 77031-3117 Date(s) debt was incurred _____ Last 4 digits of account number 4290	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,234.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.505	Nonpriority creditor's name and mailing address Mary Ellen Beattie 1200 4th St Key West, FL 33040-3763 Date(s) debt was incurred _____ Last 4 digits of account number 4769	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$500.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.506	Nonpriority creditor's name and mailing address Mary Jane Keller 4912 Mimosa Dr Plainfield, IN 46168-5734 Date(s) debt was incurred _____ Last 4 digits of account number 3368	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$450.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.507	Nonpriority creditor's name and mailing address Mary Jo Toler 4880 Mimosa Dr Plainfield, IN 46168-5735 Date(s) debt was incurred _____ Last 4 digits of account number 3368	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$450.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.508	Nonpriority creditor's name and mailing address Mary Kathleen Koontz 1417 Jolliff Rd Chesapeake, VA 23321-1303 Date(s) debt was incurred _____ Last 4 digits of account number 4247	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,451.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.509	Nonpriority creditor's name and mailing address Mary Lane Burford 738 Coachlight Rd Shreveport, LA 71106-7230 Date(s) debt was incurred ____ Last 4 digits of account number <u>5108</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,041.00
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3.510	Nonpriority creditor's name and mailing address Mary Ledford PO Box 1561 Dunlap, TN 37327 Date(s) debt was incurred ____ Last 4 digits of account number <u>4839</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,448.00
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3.511	Nonpriority creditor's name and mailing address Mary Louise Di Vito 51 Bridgetown Rd Hilton Head Island, SC 29928-3365 Date(s) debt was incurred ____ Last 4 digits of account number <u>5374</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,694.00
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3.512	Nonpriority creditor's name and mailing address Mary Lucey 15015 Pratolino Way Naples, FL 34110-2717 Date(s) debt was incurred ____ Last 4 digits of account number <u>5310</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,619.00
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3.513	Nonpriority creditor's name and mailing address Mary Smith 1219 Grinnell St Key West, FL 33040-3283 Date(s) debt was incurred ____ Last 4 digits of account number <u>4769</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
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3.514	Nonpriority creditor's name and mailing address Mary Waters King PO Box 771 Hawkins, TX 75765 Date(s) debt was incurred ____ Last 4 digits of account number <u>5245</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,120.00
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3.515	Nonpriority creditor's name and mailing address Mary White 3408 E Briarcliff Rd Birmingham, AL 35223-1309 Date(s) debt was incurred ____ Last 4 digits of account number <u>5081</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,633.00
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Name

3.516	Nonpriority creditor's name and mailing address Matthew Thiel 1725 N Main St High Point, NC 27262-2645 Date(s) debt was incurred _____ Last 4 digits of account number <u>5146</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,694.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.517	Nonpriority creditor's name and mailing address Matthew Brown 1 Foggy Field Ln Fredericksburg, VA 22406-8440 Date(s) debt was incurred _____ Last 4 digits of account number <u>5034</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$870.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.518	Nonpriority creditor's name and mailing address Matthew Whitenack 15 W 139th St Apt 3A New York, NY 10037-1512 Date(s) debt was incurred _____ Last 4 digits of account number <u>5171</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,398.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.519	Nonpriority creditor's name and mailing address Matthew Williams 2203 Wimberly Woods Dr Sanford, NC 27330-7089 Date(s) debt was incurred _____ Last 4 digits of account number <u>5385</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,366.14</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.520	Nonpriority creditor's name and mailing address Maureen Plauche 7296 Backridge Rd Sabine Pass, TX 77655-2004 Date(s) debt was incurred _____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$150.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.521	Nonpriority creditor's name and mailing address McCall and George Govignon 125 Stone Haven Dr Calhoun, GA 30701-2053 Date(s) debt was incurred _____ Last 4 digits of account number <u>5247</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,064.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.522	Nonpriority creditor's name and mailing address Mechelle Bailey 5242 Jungle Orchard St N Las Vegas, NV 89044 Date(s) debt was incurred _____ Last 4 digits of account number <u>5338</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$100.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.523	Nonpriority creditor's name and mailing address Mega Travel 3 N 5th St Temple, TX 76501-4237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$172.43
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3.524	Nonpriority creditor's name and mailing address Melanie Davis 108 Lamport Blvd Staten Island, NY 10305-3629 Date(s) debt was incurred ____ Last 4 digits of account number <u>4458</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$988.00
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3.525	Nonpriority creditor's name and mailing address Melanie King 70 Bullock Rd East Freetown, MA 02717-1016 Date(s) debt was incurred ____ Last 4 digits of account number <u>5186</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,276.00
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3.526	Nonpriority creditor's name and mailing address Melanie McKenzie 720 Connell Rd Carthage, NC 28327-7970 Date(s) debt was incurred ____ Last 4 digits of account number <u>5055</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
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3.527	Nonpriority creditor's name and mailing address Melinda Mosca 4085 Canvas Ave Rock Hill, SC 29732-8195 Date(s) debt was incurred ____ Last 4 digits of account number <u>3968</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,717.00
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3.528	Nonpriority creditor's name and mailing address Melindie Burke 15235 Old SD Highway 79 Newell, SD 57760-5871 Date(s) debt was incurred ____ Last 4 digits of account number <u>5308</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,010.08
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3.529	Nonpriority creditor's name and mailing address Melissa King-Polsinelli 1701 Spruce Ave Winter Park, FL 32789-2021 Date(s) debt was incurred ____ Last 4 digits of account number <u>5323</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,976.62
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3.530	<p>Nonpriority creditor's name and mailing address Melissa McNatt</p> <p>144 Linville Ln Easley, SC 29640-6625</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5314</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$400.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.531	<p>Nonpriority creditor's name and mailing address Mendy Ford</p> <p>410 Scottsville Rd Marshall, TX 75672-3337</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5672</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$400.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.532	<p>Nonpriority creditor's name and mailing address Michael Conway</p> <p>335 W 7th St Salem, OH 44460-2121</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5267</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,050.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.533	<p>Nonpriority creditor's name and mailing address Michael Culotta</p> <p>388 Strathaven Dr Pelham, AL 35124-6282</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4356</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$943.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.534	<p>Nonpriority creditor's name and mailing address Michael Grout</p> <p>941 Collins Rd Villa Hills, KY 41017-1113</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4253</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,548.36</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.535	<p>Nonpriority creditor's name and mailing address Michael Severin</p> <p>9122 Cottonwood Canyon Dr Lenexa, KS 66219-8145</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3870</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,234.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.536	<p>Nonpriority creditor's name and mailing address Michael Bailey</p> <p>5916 Bullboat Ct North Las Vegas, NV 89031-3489</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5338</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$450.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.537	<p>Nonpriority creditor's name and mailing address Michael Cavanugh</p> <p>7020 Concord Rd Savannah, GA 31410-2506</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5333</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.538	<p>Nonpriority creditor's name and mailing address Michael Maita</p> <p>1515 Miwok Ct Brentwood, CA 94513-4343</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5027</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.539	<p>Nonpriority creditor's name and mailing address Michael Meninger</p> <p>3440 Laurelwood Ct NE Roswell, GA 30075-5250</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4369</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.540	<p>Nonpriority creditor's name and mailing address Michael Sattler CC</p> <p>700 Colorado Blvd # 325 Denver, CO 80206-4084</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3561</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,386.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: 193561</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.541	<p>Nonpriority creditor's name and mailing address Michayla Davis</p> <p>3845 Glaze Rd Kountze, TX 77625-8119</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5175</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$424.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.542	<p>Nonpriority creditor's name and mailing address Michele Chapman</p> <p>11360 Halcyon Loop Daphne, AL 36526-8472</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5173</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,348.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.543	<p>Nonpriority creditor's name and mailing address Michele Doleshal</p> <p>1270 Covey Ln Eagle River, WI 54521-9441</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5291</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,000.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor **New York City Vacations, Inc.**
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Case number (if known)

3.544	Nonpriority creditor's name and mailing address Miriam Payne 345 River Club Rd Lexington, SC 29072-6720 Date(s) debt was incurred ____ Last 4 digits of account number 5060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,136.00
3.545	Nonpriority creditor's name and mailing address Misha Dent 152 Glenwood Ln Hurricane, WV 25526-9138 Date(s) debt was incurred ____ Last 4 digits of account number 5055	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00
3.546	Nonpriority creditor's name and mailing address Mollie Tharp 103 Lincoln Ave Denton, KS 66017-4041 Date(s) debt was incurred ____ Last 4 digits of account number 5389	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,585.00
3.547	Nonpriority creditor's name and mailing address Molly Hammack 7481 Meadow Violet Ct Avon, IN 46123-7630 Date(s) debt was incurred ____ Last 4 digits of account number 3368	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
3.548	Nonpriority creditor's name and mailing address Mona Daugherty 310 S Tyler St Apt 7 Morgantown, KY 42261-8184 Date(s) debt was incurred ____ Last 4 digits of account number 5295	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,950.14
3.549	Nonpriority creditor's name and mailing address Monica Donahue PO Box 1676 Eagle River, WI 54521 Date(s) debt was incurred ____ Last 4 digits of account number 5291	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.550	Nonpriority creditor's name and mailing address Monica Haskell 2819 Harris Ave Key West, FL 33040-4039 Date(s) debt was incurred ____ Last 4 digits of account number 4769	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00

3.551	<p>Nonpriority creditor's name and mailing address Monyette Cousett</p> <p>8224 Swallow Falls St North Las Vegas, NV 89085-4415</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5338</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.552	<p>Nonpriority creditor's name and mailing address Mountain Heritage High School Group</p> <p>PO Box 70 Burnsville, NC 28714</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3589</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,240.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.553	<p>Nonpriority creditor's name and mailing address Nancy Busch</p> <p>5119 Fairhaven Rd Davenport, IA 52807-3078</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4172</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,196.16</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.554	<p>Nonpriority creditor's name and mailing address Nancy Davis</p> <p>506 E 11th St Dell Rapids, SD 57022-1051</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5145</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,015.88</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.555	<p>Nonpriority creditor's name and mailing address Nancy Marie Christian</p> <p>1930 Burgundy Ln Brentwood, CA 94513-6479</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5027</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$15.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.556	<p>Nonpriority creditor's name and mailing address Nancy Shelbourne</p> <p>5094 Lilium Dr Plainfield, IN 46168-5701</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3368</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$650.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.557	<p>Nonpriority creditor's name and mailing address Natasha Williams</p> <p>2917 Chace Lake Dr Birmingham, AL 35244-1070</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5019</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$121.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	New York City Vacations, Inc. <small>Name</small>	Case number (if known)	
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3.558	Nonpriority creditor's name and mailing address National September 11 Memorial Attention: Finance 200 Liberty St Fl 16 New York, NY 10281-2103 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$124.50
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3.559	Nonpriority creditor's name and mailing address Nay Roach 305 Holcomb St Marshall, TX 75670-3849 Date(s) debt was incurred ____ Last 4 digits of account number <u>4097</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
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3.560	Nonpriority creditor's name and mailing address New York Hilton Attn: Accounting Dept. 1335 Avenue of Americas New York, NY 10001-6078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,051.29
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3.561	Nonpriority creditor's name and mailing address New York Water Taxi 459 E 12th St Pier 79 New York, NY 10009-4024 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$474.00
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3.562	Nonpriority creditor's name and mailing address Nexion LLC Linda Briseno, Nexion Accounting 6565 N Macarthur Blvd Ste 400 Irving, TX 75039-2468 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$202.78
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3.563	Nonpriority creditor's name and mailing address Nichole Harward 350 S 200 E Glenwood, UT 84730-7716 Date(s) debt was incurred ____ Last 4 digits of account number <u>5261</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,000.00
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3.564	Nonpriority creditor's name and mailing address Nicole Chelius 2112 Kings Xing SW Winter Haven, FL 33880-2769 Date(s) debt was incurred ____ Last 4 digits of account number <u>5382</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,625.00
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	Debtor New York City Vacations, Inc.	Case number (if known) _____
	Name _____	

3.565	Nonpriority creditor's name and mailing address Nicole Gray 121 Jacks Run Rd Pittsburgh, PA 15122 Date(s) debt was incurred _____ Last 4 digits of account number 5136	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,668.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.566	Nonpriority creditor's name and mailing address Nida Hollimon Purser 7473 County Road 23 Mount Hope, AL 35651-9792 Date(s) debt was incurred _____ Last 4 digits of account number 4217	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$868.04 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.567	Nonpriority creditor's name and mailing address Nita Martin 2431 New Holland Cir Murfreesboro, TN 37128-8272 Date(s) debt was incurred _____ Last 4 digits of account number 5105	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,278.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.568	Nonpriority creditor's name and mailing address Noelle Wachter 4152 54th Ave NE Hickory, PA 15340 Date(s) debt was incurred _____ Last 4 digits of account number 5197	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,400.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.569	Nonpriority creditor's name and mailing address Norma Bull PO Box 169 Riner, VA 24149 Date(s) debt was incurred _____ Last 4 digits of account number 3831	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,132.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.570	Nonpriority creditor's name and mailing address Norma Guillen 14359 Misty Meadow Ln Houston, TX 77079-3167 Date(s) debt was incurred _____ Last 4 digits of account number 3923	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,008.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.571	Nonpriority creditor's name and mailing address Northland Travel 206 E Broadway Ave Bismarck, ND 58501-3841 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$18.45 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Name

3.572	Nonpriority creditor's name and mailing address Northwood Travel Inc 1969 Sunset Point Rd Ste 16 Clearwater Beach, FL 33765-1145 Date(s) debt was incurred _____ Last 4 digits of account number <u>4117</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,422.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.573	Nonpriority creditor's name and mailing address NYC & Company 810 7th Ave Fl 3 New York, NY 10019-5896 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$785.88 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.574	Nonpriority creditor's name and mailing address Olga M. Bezditny Box 3116 Steinbach, Manitoba R5G 1-P4 Date(s) debt was incurred _____ Last 4 digits of account number <u>5052</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$125.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.575	Nonpriority creditor's name and mailing address Palm Coast Travel 4800 N Federal Hwy Ste D-200 Boca Raton, FL 33431-5188 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$517.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.576	Nonpriority creditor's name and mailing address Pam White 20026 Walnut Main St Aberdeen, MS 39730-8787 Date(s) debt was incurred _____ Last 4 digits of account number <u>5179</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,290.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.577	Nonpriority creditor's name and mailing address Pam Spooner 5909 Stonegate Ln Trussville, AL 35173-1087 Date(s) debt was incurred _____ Last 4 digits of account number <u>5275</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,329.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.578	Nonpriority creditor's name and mailing address Pamela Bruse 33133 Paul Ave Bigelow, MN 56117-1105 Date(s) debt was incurred _____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,190.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Name

3.579	<p>Nonpriority creditor's name and mailing address Pamela Jean Bhaila</p> <p>2015 Andalucia Ln Brentwood, CA 94513-6491</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5027</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$150.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.580	<p>Nonpriority creditor's name and mailing address Pamela Kranig</p> <p>4930 Brookglen Way Carmichael, CA 95608-0957</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5222</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,262.50</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.581	<p>Nonpriority creditor's name and mailing address Pamela Mathews</p> <p>105 Mizell Ln West Monroe, LA 71291-9058</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3495</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,181.68</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.582	<p>Nonpriority creditor's name and mailing address Pamela Schaper</p> <p>14180 Misty Meadow Ln Houston, TX 77079-3180</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3923</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,008.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.583	<p>Nonpriority creditor's name and mailing address Pamela Spilbeler</p> <p>4983 Dahlia Dr Plainfield, IN 46168-5712</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 3368</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$450.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.584	<p>Nonpriority creditor's name and mailing address Patricia Bushnell</p> <p>1006 Barstow Ave Eugene, OR 97404-1510</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5368</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,236.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.585	<p>Nonpriority creditor's name and mailing address Patricia Torrence</p> <p>800 S Main St Rossville, KS 66533-9660</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4577</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,206.63</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

	Debtor New York City Vacations, Inc.	Case number (if known) _____
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3.586	Nonpriority creditor's name and mailing address Patricia Annette Kassawara 1872 Fiano Ln Brentwood, CA 94513-5280 Date(s) debt was incurred _____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.587	Nonpriority creditor's name and mailing address Patricia Cox 1700 Fairburn Dr Cumming, GA 30040-7842 Date(s) debt was incurred _____ Last 4 digits of account number 4369	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.588	Nonpriority creditor's name and mailing address Patricia Graham 397 Ashbury Way Naples, FL 34110-1321 Date(s) debt was incurred _____ Last 4 digits of account number 3368	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$450.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.589	Nonpriority creditor's name and mailing address Patricia Gray PO Box 1868 Lusby, MD 20657 Date(s) debt was incurred _____ Last 4 digits of account number 5024	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,537.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.590	Nonpriority creditor's name and mailing address Patricia Schossler 16465 Hodges Ave Cedar Key, FL 32625-4683 Date(s) debt was incurred _____ Last 4 digits of account number 4027	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,516.68 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.591	Nonpriority creditor's name and mailing address Patricia Smith 3111 Sleepy Hollow Ln Temple, TX 76502-7145 Date(s) debt was incurred _____ Last 4 digits of account number 4136	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,594.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.592	Nonpriority creditor's name and mailing address Patricia Worley 4810 Trailing Fox Dr Cumming, GA 30040-9596 Date(s) debt was incurred _____ Last 4 digits of account number 4877	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,578.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **New York City Vacations, Inc.**
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3.593	Nonpriority creditor's name and mailing address Patrick Weaver 2828 E Linda Ct Gilbert, AZ 85234-6399 Date(s) debt was incurred ____ Last 4 digits of account number 5089	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,940.00
3.594	Nonpriority creditor's name and mailing address Patrick H Clements 6165 Emily Ln Longview, TX 75605-6781 Date(s) debt was incurred ____ Last 4 digits of account number 4097	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,800.00
3.595	Nonpriority creditor's name and mailing address Patsy and Rodney Plummer 148 Woodstone Dr Ruston, LA 71270-7522 Date(s) debt was incurred ____ Last 4 digits of account number 4964	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,558.00
3.596	Nonpriority creditor's name and mailing address Patsy Talberg 904 Fairway Dr Princeton, MN 55371-2241 Date(s) debt was incurred ____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.597	Nonpriority creditor's name and mailing address Patsy Talberg 904 Fairway Dr Princeton, MN 55371-2241 Date(s) debt was incurred ____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,074.00
3.598	Nonpriority creditor's name and mailing address Patti Jo Styka 1951 Burgundy Ln Brentwood, CA 94513-6479 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
3.599	Nonpriority creditor's name and mailing address Paul Wendt 1401 Laurel Leaf Ln Pearland, TX 77581-3551 Date(s) debt was incurred ____ Last 4 digits of account number 5279	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,690.00

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3.600	<p>Nonpriority creditor's name and mailing address Paula Dean</p> <p>180 Windwood Rd Dothan, AL 36301-8374</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4945</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,067.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.601	<p>Nonpriority creditor's name and mailing address Paula Dearing</p> <p>9380 Oak St Zionsville, IN 46077-7656</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3368</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$450.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.602	<p>Nonpriority creditor's name and mailing address Pauline Anderson</p> <p>2081 Judith Pl Longwood, FL 32779-2781</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5047</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,635.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.603	<p>Nonpriority creditor's name and mailing address Penny Key</p> <p>2310 Caroline Park Ln Spring, TX 77386-1824</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5346</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,605.12</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.604	<p>Nonpriority creditor's name and mailing address Perry Kaye</p> <p>8330 Charleston Peak St Las Vegas, NV 89166-5168</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5338</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$200.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.605	<p>Nonpriority creditor's name and mailing address Phyllis Loudermilk</p> <p>576 NW 1391st Rd Holden, MO 64040-8477</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5009</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$11,610.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.606	<p>Nonpriority creditor's name and mailing address Phyllis Tucker</p> <p>319 County Road 466 Gainesville, TX 76240-1759</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5227</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,961.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.607	Nonpriority creditor's name and mailing address Phyllis Grantham 1414 Cypress Bend Cv New Braunfels, TX 78130-3061 Date(s) debt was incurred _____ Last 4 digits of account number <u>5061</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,398.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.608	Nonpriority creditor's name and mailing address Polly Pressley PO Box 302 Jefferson, GA 30549 Date(s) debt was incurred _____ Last 4 digits of account number <u>5190</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.609	Nonpriority creditor's name and mailing address Rachel M Hobbs 133 Oak Hollow Rd Monroeville, AL 36460-5710 Date(s) debt was incurred _____ Last 4 digits of account number <u>5271</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,187.75 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.610	Nonpriority creditor's name and mailing address Ramona Pound 4713 E Donington Dr Bloomington, IN 47401-8897 Date(s) debt was incurred _____ Last 4 digits of account number <u>3368</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.611	Nonpriority creditor's name and mailing address Ramona Pound 5029 Silverbell Dr Plainfield, IN 46168-5737 Date(s) debt was incurred _____ Last 4 digits of account number <u>3368</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$400.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.612	Nonpriority creditor's name and mailing address Randall Robertson 3291 NW 96th Ave City of Sunrise, FL 33351-7138 Date(s) debt was incurred _____ Last 4 digits of account number <u>5066</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,649.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.613	Nonpriority creditor's name and mailing address Randy Swartz 2420 NW 63rd Pl Ocala, FL 34475-2458 Date(s) debt was incurred _____ Last 4 digits of account number <u>5095</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,638.30 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **New York City Vacations, Inc.**
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Case number (if known)

3.614	Nonpriority creditor's name and mailing address Rebeca Anselet 623 S 6th St Nederland, TX 77627-2621 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$331.00
3.615	Nonpriority creditor's name and mailing address Rebecca Bossley 524 W Bilbo St # Steet Orange, TX 77630-2628 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00
3.616	Nonpriority creditor's name and mailing address Rebecca Ferguson 1570 Burgundy Ct Brentwood, CA 94513-6480 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.617	Nonpriority creditor's name and mailing address Rebecca Jerrell 888 SE Santee Dr Greensburg, IN 47240-7810 Date(s) debt was incurred ____ Last 4 digits of account number 3368	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00
3.618	Nonpriority creditor's name and mailing address Rebecca Rodriguez 14514 Misty Meadow Ln Houston, TX 77079-3110 Date(s) debt was incurred ____ Last 4 digits of account number 3923	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,008.00
3.619	Nonpriority creditor's name and mailing address Rebecca Smith 4985 Silverbell Dr Plainfield, IN 46168-5707 Date(s) debt was incurred ____ Last 4 digits of account number 3368	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
3.620	Nonpriority creditor's name and mailing address Rebecca Starnes 3122 Mayhem Dr Ste 801-270 Tallahassee, FL 32301 Date(s) debt was incurred ____ Last 4 digits of account number 5128	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,890.00

Debtor	New York City Vacations, Inc. <small>Name</small>	Case number (if known)	
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3.621	Nonpriority creditor's name and mailing address Regina Butts 202 Stafford Beach Dr Byron, GA 31008-3861 Date(s) debt was incurred ____ Last 4 digits of account number 5340	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.00
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3.622	Nonpriority creditor's name and mailing address Renee Keilman 14453 Pine Valley Dr Lathrop, CA 95330-9690 Date(s) debt was incurred ____ Last 4 digits of account number 5096	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,257.00
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3.623	Nonpriority creditor's name and mailing address Reni Miguez 2734 15th St Port Neches, TX 77651-5139 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
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3.624	Nonpriority creditor's name and mailing address Residence Inn by Marriott 1717 Broadway New York, NY 10019-5214 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,513.26
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3.625	Nonpriority creditor's name and mailing address Rhonda Christianson 8100 Ridgewood Rd Goodlettsville, TN 37072-9465 Date(s) debt was incurred ____ Last 4 digits of account number 5373	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,793.00
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3.626	Nonpriority creditor's name and mailing address Richard Berning 10 Beachview Ln Springfield, IL 62712-9513 Date(s) debt was incurred ____ Last 4 digits of account number 5274	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164.00
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3.627	Nonpriority creditor's name and mailing address Richard J Duckworth 1990 Blue Spring Rd Decherd, TN 37324-3920 Date(s) debt was incurred ____ Last 4 digits of account number 4323	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$716.25
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	Debtor New York City Vacations, Inc.	Case number (if known) _____
	Name _____	

3.628	Nonpriority creditor's name and mailing address Rick Black 1114 Macarthur Dr Papillion, NE 68046-3859 Date(s) debt was incurred _____ Last 4 digits of account number 4930	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,522.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.629	Nonpriority creditor's name and mailing address Rinda Dederig N3130 Alfreds Rd Weyauwega, WI 54983-8700 Date(s) debt was incurred _____ Last 4 digits of account number 4928	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,025.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.630	Nonpriority creditor's name and mailing address Rita Smith 1548 S Scott Park Rd Eldridge, IA 52748-1308 Date(s) debt was incurred _____ Last 4 digits of account number 4172	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,196.17 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.631	Nonpriority creditor's name and mailing address Rob Simons 221 Legends Club Dr Mount Pleasant, SC 29466-9045 Date(s) debt was incurred _____ Last 4 digits of account number 5035	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,892.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.632	Nonpriority creditor's name and mailing address Robert Largent 840 Freedom Cir Hazel Green, WI 53811-9382 Date(s) debt was incurred _____ Last 4 digits of account number 4490	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,498.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.633	Nonpriority creditor's name and mailing address Robert McGriff 1021 Regas Dr S Atlantic Beach, FL 32233-7008 Date(s) debt was incurred _____ Last 4 digits of account number 5044	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,877.86 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.634	Nonpriority creditor's name and mailing address Robert Quinn 524 Faulkner Dr Schertz, TX 78154-1142 Date(s) debt was incurred _____ Last 4 digits of account number 4889	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,070.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.635	Nonpriority creditor's name and mailing address Robert Williams 1425 SE 13th Ave Deerfield Beach, FL 33441-7313 Date(s) debt was incurred _____ Last 4 digits of account number <u>5066</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,649.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.636	Nonpriority creditor's name and mailing address Robert Albert Woods 1635 Shiraz Ct Brentwood, CA 94513-4253 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$300.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.637	Nonpriority creditor's name and mailing address Robert Bond 255 Winminster Dr Cocoa, FL 32922 Date(s) debt was incurred _____ Last 4 digits of account number <u>5240</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,933.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.638	Nonpriority creditor's name and mailing address Robert Deasey 8040 Lohn Road Halfmoon Bay, BC VON-1Y1 Date(s) debt was incurred _____ Last 4 digits of account number <u>5138</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,087.05</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.639	Nonpriority creditor's name and mailing address Robert Mark Linett 2058 Navarra Way Brentwood, CA 94513-5285 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$15.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposits</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.640	Nonpriority creditor's name and mailing address Robert Miller 55 Morning Star Ln Christiansburg, VA 24068 Date(s) debt was incurred _____ Last 4 digits of account number <u>5030</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,457.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.641	Nonpriority creditor's name and mailing address Roberta Gagliano 13504 James Ave S Burnsville, MN 55306 Date(s) debt was incurred _____ Last 4 digits of account number <u>5093</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,533.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Name

3.642	<p>Nonpriority creditor's name and mailing address Rodney Garcia</p> <p>6 Shady Lake Ct Sacramento, CA 95834-1516</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4433</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$938.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.643	<p>Nonpriority creditor's name and mailing address Rodney Plummer</p> <p>148 Woodstone Dr Ruston, LA 71270-7522</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4976</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,001.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.644	<p>Nonpriority creditor's name and mailing address Roger Arnold</p> <p>5022 Wall Ln Ball, LA 71405-3646</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5174</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$400.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.645	<p>Nonpriority creditor's name and mailing address Ronald Mosley</p> <p>310 Maple Dr Vidalia, GA 30474-8909</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4417</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$420.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.646	<p>Nonpriority creditor's name and mailing address Ronda Holland</p> <p>3300 Renwick Ave Elk Grove, CA 95758-7490</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5034</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$270.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.647	<p>Nonpriority creditor's name and mailing address Rosa L Rickman</p> <p>600 Ervin Coker Rd NE Rome, GA 30161-9621</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5249</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,839.50</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.648	<p>Nonpriority creditor's name and mailing address Rosalina Arias</p> <p>PO Box 2317 Julian, CA 92036</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5018</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$517.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Customer prepayment or Deposit</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	New York City Vacations, Inc. <small>Name</small>	Case number (if known) _____
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3.649	Nonpriority creditor's name and mailing address Rosalyn D Earl 8807 C Island Way Tampa, FL 33601 Date(s) debt was incurred _____ Last 4 digits of account number <u>3782</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,200.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.650	Nonpriority creditor's name and mailing address Rose A. Yuhas 1829 Moscato Pl Brentwood, CA 94513-5271 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.651	Nonpriority creditor's name and mailing address Rose Simmons 1905 E 47th Pl Davenport, IA 52807-1268 Date(s) debt was incurred _____ Last 4 digits of account number <u>4172</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,196.17 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.652	Nonpriority creditor's name and mailing address Rosemary Henriksen 825 Maine Ave Adrian, MN 56110-1068 Date(s) debt was incurred _____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,340.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.653	Nonpriority creditor's name and mailing address Roxanne Donnan 682 Wildlife Rd # R Clinton, SC 29325-3708 Date(s) debt was incurred _____ Last 4 digits of account number <u>5167</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$371.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.654	Nonpriority creditor's name and mailing address Roy Hutton 321 Palmer St Adamsville, TN 38310-2445 Date(s) debt was incurred _____ Last 4 digits of account number <u>3608</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,871.68 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.655	Nonpriority creditor's name and mailing address Ruth Harriet Costa 1930 Burgundy Ln Brentwood, CA 94513-6479 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$150.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Name

3.656	<p>Nonpriority creditor's name and mailing address Sabine Collins</p> <p>48 Sweet Gum Cir Sanford, NC 27332-1346</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5055</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$200.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.657	<p>Nonpriority creditor's name and mailing address Sadies Global Travel Ltd.</p> <p>8412 Crossland Loop Montgomery, AL 36117-0903</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,278.32</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.658	<p>Nonpriority creditor's name and mailing address Sallie McBride</p> <p>5150 Ellisboro Rd Stokesdale, NC 27357-7445</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4966</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,295.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.659	<p>Nonpriority creditor's name and mailing address Sammie Ryland</p> <p>545 Jeffrey Ln Deville, LA 71328-9387</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5174</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$400.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.660	<p>Nonpriority creditor's name and mailing address Sandcastle Wishes Travel</p> <p>PO Box 275 Kimberly, AL 35091</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5339</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$250.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.661	<p>Nonpriority creditor's name and mailing address Sandra Nolen</p> <p>58 Dogwood Ln Fayette, AL 35555-1416</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4369</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$100.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.662	<p>Nonpriority creditor's name and mailing address Sandra Preuss</p> <p>12150 E Briarwood Ave Unit 145 Centennial, CO 80112-6755</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>4965</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,000.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	New York City Vacations, Inc. <small>Name</small>	Case number (if known)	
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3.663	Nonpriority creditor's name and mailing address Sandra Rhoads 264 State Road 327 Hudson, IN 46747-9405 Date(s) debt was incurred ____ Last 4 digits of account number <u>5362</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$922.00
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3.664	Nonpriority creditor's name and mailing address Sandra W. Howell 9005 Saffron Ln Silver Spring, MD 20901-4267 Date(s) debt was incurred ____ Last 4 digits of account number <u>3672</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,054.20
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3.665	Nonpriority creditor's name and mailing address Sara Cochran-Kelton 1132 Farmhouse Rd Lascassas, TN 37085-4592 Date(s) debt was incurred ____ Last 4 digits of account number <u>5067</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,376.14
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3.666	Nonpriority creditor's name and mailing address Sara Stokes 5519 McCommas Blvd Dallas, TX 75206-5633 Date(s) debt was incurred ____ Last 4 digits of account number <u>5285</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,881.34
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3.667	Nonpriority creditor's name and mailing address Sarah Oettle 463 High Tech Dr Georgetown, TX 78626-2185 Date(s) debt was incurred ____ Last 4 digits of account number <u>5248</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,952.00
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3.668	Nonpriority creditor's name and mailing address Sarah Rodgers 8300 Lake Powell Dr Nederland, TX 77627-5655 Date(s) debt was incurred ____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00
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3.669	Nonpriority creditor's name and mailing address Scherry Bryant 6006 Hobby Ln Pinson, AL 35126-4466 Date(s) debt was incurred ____ Last 4 digits of account number <u>4369</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
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Name

3.670	Nonpriority creditor's name and mailing address Shabrya Lott 8224 Swallow Falls St North Las Vegas, NV 89085-4415 Date(s) debt was incurred _____ Last 4 digits of account number <u>5338</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.671	Nonpriority creditor's name and mailing address Shanise Earl Johnson 5949 E Christine Ave Fresno, CA 93727-6558 Date(s) debt was incurred _____ Last 4 digits of account number <u>5034</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$620.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.672	Nonpriority creditor's name and mailing address Shanise Johnson 5949 E Christine Ave Fresno, CA 93727-6558 Date(s) debt was incurred _____ Last 4 digits of account number <u>5034</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.673	Nonpriority creditor's name and mailing address Shannon Burgess 315 S Wingfield Rd Greer, SC 29650-3431 Date(s) debt was incurred _____ Last 4 digits of account number <u>5034</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,018.14 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.674	Nonpriority creditor's name and mailing address Sharon Brown 8060 Frankford Rd Apt 424 Dallas, TX 75252-6883 Date(s) debt was incurred _____ Last 4 digits of account number <u>3693</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$947.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.675	Nonpriority creditor's name and mailing address Sharon Filips 9060 Tucson St Plymouth, MI 48170-4132 Date(s) debt was incurred _____ Last 4 digits of account number <u>5015</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,112.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.676	Nonpriority creditor's name and mailing address Sharon Ritchie 1326 Heather Dr Murphys, CA 95247-9688 Date(s) debt was incurred _____ Last 4 digits of account number <u>4335</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$143.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **New York City Vacations, Inc.**
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Case number (if known)

3.677	Nonpriority creditor's name and mailing address Sharon Ball 1572 California Trl Brentwood, CA 94513-4337 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125.00
3.678	Nonpriority creditor's name and mailing address Sharon Johnson 218 Hill Ln West Blocton, AL 35184-5002 Date(s) debt was incurred ____ Last 4 digits of account number 5019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$650.00
3.679	Nonpriority creditor's name and mailing address Sharon Lou Burris 229 Marble Dr Antioch, CA 94509-6218 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125.00
3.680	Nonpriority creditor's name and mailing address Sharyn Marie Metez 291 Cheshire Dr Brentwood, CA 94513-2944 Date(s) debt was incurred ____ Last 4 digits of account number 5027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125.00
3.681	Nonpriority creditor's name and mailing address Shauna Richards 13716 Field Stream Ln Manor, TX 78653-3776 Date(s) debt was incurred ____ Last 4 digits of account number 5222	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,262.50
3.682	Nonpriority creditor's name and mailing address Shea DiBenedetto 6962 Meadow Ridge Dr Mc Calla, AL 35111 Date(s) debt was incurred ____ Last 4 digits of account number 5053	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,111.00
3.683	Nonpriority creditor's name and mailing address Sheila Gray 115 Angel Oak Trl Dallas, GA 30132-6315 Date(s) debt was incurred ____ Last 4 digits of account number 5070	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,126.08

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3.684	Nonpriority creditor's name and mailing address Shelbie Tarlowski 11013 N 35th Dr Phoenix, AZ 85029-4001 Date(s) debt was incurred _____ Last 4 digits of account number 5232	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,517.05 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.685	Nonpriority creditor's name and mailing address Shelby St Romain 19021 Turnberry Ct Baton Rouge, LA 70809-6607 Date(s) debt was incurred _____ Last 4 digits of account number 4926	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,271.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.686	Nonpriority creditor's name and mailing address Shelley Greene 869 Cedar Creek Dr Asheboro, NC 27205-2621 Date(s) debt was incurred _____ Last 4 digits of account number 5056	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,695.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.687	Nonpriority creditor's name and mailing address Shelley Scarborough 4346 Vista Ln Lynn Haven, FL 32444-4419 Date(s) debt was incurred _____ Last 4 digits of account number 5388	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,806.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.688	Nonpriority creditor's name and mailing address Shelley Permenter 2010 Llano Rd Beaumont, TX 77713-5612 Date(s) debt was incurred _____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.689	Nonpriority creditor's name and mailing address Shelly Mohr Johnsen 501 Belvedere Ave Beatrice, NE 68310-4850 Date(s) debt was incurred _____ Last 4 digits of account number 4110	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,028.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.690	Nonpriority creditor's name and mailing address Sheraton NY Times Square ATTN: Valerie Dillon 811 7th Ave New York, NY 10019-6002 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Name

3.691	Nonpriority creditor's name and mailing address Sherri Singleton Premier Vacations LLC 4892 Colonial Hwy Evington, VA 24550-1900 Date(s) debt was incurred _____ Last 4 digits of account number 5036	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,508.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.692	Nonpriority creditor's name and mailing address Sherry Hammond 471 Barbados Cir Lakeland, FL 33803-5611 Date(s) debt was incurred _____ Last 4 digits of account number 5306	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,706.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.693	Nonpriority creditor's name and mailing address Sherry Hendrickson 6330 Atherly Cres Mississauga, ON L5N 8-J2 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,587.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.694	Nonpriority creditor's name and mailing address Sherry Stauffer 3801 Steltz Rd New Freedom, PA 17349-9285 Date(s) debt was incurred _____ Last 4 digits of account number 5163	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,444.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.695	Nonpriority creditor's name and mailing address Sherry Sinnard 1108 Plantation Lakes Cir Chesapeake, VA 23320-8106 Date(s) debt was incurred _____ Last 4 digits of account number 4830	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,978.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.696	Nonpriority creditor's name and mailing address Shirah Umansky 4150 Regents Park Row La Jolla, CA 92037 Date(s) debt was incurred _____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.697	Nonpriority creditor's name and mailing address Sondra McCorquodale PO Box 8980 Rocky Mount, NC 27804 Date(s) debt was incurred _____ Last 4 digits of account number 5188	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,631.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

3.698	<p>Nonpriority creditor's name and mailing address</p> <p>St. Louis Thanksgiving Group Dream Vacations, a Cruise 1 Company 1201 W Cypress Creek Rd Fort Lauderdale, FL 33301</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$17,120.00</p>
3.699	<p>Nonpriority creditor's name and mailing address</p> <p>Stacy Tomlinson</p> <p>44 Crestline Dr Somerset, KY 42503-6242</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5150</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$3,584.04</p>
3.700	<p>Nonpriority creditor's name and mailing address</p> <p>Stanley Silver</p> <p>3688 Underbrush Trl The Villages, FL 32163-2706</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5166</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,110.00</p>
3.701	<p>Nonpriority creditor's name and mailing address</p> <p>Stephanie Strzelecki</p> <p>8500 W Roseview Dr Niles, IL 60714-1856</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4965</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,287.04</p>
3.702	<p>Nonpriority creditor's name and mailing address</p> <p>Stephanie Grayson</p> <p>162 Royal Dr Madison, AL 35758-3167</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 4369</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$100.00</p>
3.703	<p>Nonpriority creditor's name and mailing address</p> <p>Stephanie Taylor</p> <p>13200 Carriage Way Oklahoma City, OK 73142-3310</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5103</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$14,430.00</p>
3.704	<p>Nonpriority creditor's name and mailing address</p> <p>Stephen Munt</p> <p>5535 Shipley Ct Centreville, VA 20120-3308</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number 5303</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,935.00</p>

Name

3.705	Nonpriority creditor's name and mailing address Stephen Muth 44087 W Granite Dr Maricopa, AZ 85139-8865 Date(s) debt was incurred _____ Last 4 digits of account number <u>5114</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,703.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.706	Nonpriority creditor's name and mailing address Steven Johnson Turnberry Travel 1184 Hill Rd N Pickerington, OH 43147-8657 Date(s) debt was incurred _____ Last 4 digits of account number <u>4891</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,398.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.707	Nonpriority creditor's name and mailing address Steven Murphy 1624 Gamay Ln Brentwood, CA 94513-4332 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$15.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.708	Nonpriority creditor's name and mailing address Steven W. Tsunekawa 7002 Harborhaven Way Discovery Bay, CA 94505-1756 Date(s) debt was incurred _____ Last 4 digits of account number <u>5027</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$250.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.709	Nonpriority creditor's name and mailing address Stires & Company 22 Preston Rd Dallas, PA 18612-9082 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accountant</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.710	Nonpriority creditor's name and mailing address Stuart Rothenberg 10 Avondale Dr Cold Spring Harbor, NY 11724-1602 Date(s) debt was incurred _____ Last 4 digits of account number <u>5020</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.711	Nonpriority creditor's name and mailing address Sue Paulzine 600 Parnell St Iona, MN 56141-1009 Date(s) debt was incurred _____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,680.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **New York City Vacations, Inc.**
Name

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3.712	Nonpriority creditor's name and mailing address Summer Moore 210 Cox Dr Warner Robins, GA 31093-1910 Date(s) debt was incurred ____ Last 4 digits of account number 5340	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.00
3.713	Nonpriority creditor's name and mailing address Sundee Warren 1177 Brush Creek Rd Colbert, GA 30628-3904 Date(s) debt was incurred ____ Last 4 digits of account number 5190	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.714	Nonpriority creditor's name and mailing address Susan Collins 916 E Green Acres Dr Hobbs, NM 88240-4532 Date(s) debt was incurred ____ Last 4 digits of account number 5377	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,689.00
3.715	Nonpriority creditor's name and mailing address Susan Gentry 2118 Companero Ave Orlando, FL 32804-6504 Date(s) debt was incurred ____ Last 4 digits of account number 5079	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,340.00
3.716	Nonpriority creditor's name and mailing address Susan Birk 1790 Grandview Dr Jasper, IN 47546-2434 Date(s) debt was incurred ____ Last 4 digits of account number 5264	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,394.00
3.717	Nonpriority creditor's name and mailing address Susan Dolinar 7212 Timberlake Rd Lynchburg, VA 24502-2337 Date(s) debt was incurred ____ Last 4 digits of account number 5214	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,495.88
3.718	Nonpriority creditor's name and mailing address Susan Kettelhodt 12921 282nd Ave NW Zimmerman, MN 55398-9447 Date(s) debt was incurred ____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,917.00

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3.719	Nonpriority creditor's name and mailing address Susan Lantz 3421 S 400 W New Palestine, IN 46163-9155 Date(s) debt was incurred ____ Last 4 digits of account number 3368	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
3.720	Nonpriority creditor's name and mailing address Susan Lueck 9489 County Road 6 NW Princeton, MN 55371-5202 Date(s) debt was incurred ____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,074.00
3.721	Nonpriority creditor's name and mailing address Susan Poynor 6366 Elm Crest Ct Fort Worth, TX 76132-4309 Date(s) debt was incurred ____ Last 4 digits of account number 5122	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$924.00
3.722	Nonpriority creditor's name and mailing address Susie Sarrasin Box 664 St. Malo, MN R0A-1T0 Date(s) debt was incurred ____ Last 4 digits of account number 5052	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$195.00
3.723	Nonpriority creditor's name and mailing address Suzanne Meyer 82039 Deniro Ct Indio, CA 92201-8115 Date(s) debt was incurred ____ Last 4 digits of account number 4072	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,029.00
3.724	Nonpriority creditor's name and mailing address Suzanne Bowering 402 Main St Wakefield, MA 01880-3018 Date(s) debt was incurred ____ Last 4 digits of account number 5277	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,750.00
3.725	Nonpriority creditor's name and mailing address Suzanne Brown 500 N Duke St Apt 54-103 Durham, NC 27701-2059 Date(s) debt was incurred ____ Last 4 digits of account number 4898	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$853.00

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3.726	<p>Nonpriority creditor's name and mailing address Suzzane Burtchaell</p> <p>313 Henry Russell St Franklin, TN 37064-1524</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5306</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,475.07</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.727	<p>Nonpriority creditor's name and mailing address Tamara Elrite</p> <p>11321 Silverton Dr Milton, FL 32583-6905</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5361</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,390.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.728	<p>Nonpriority creditor's name and mailing address Tamita T. Williams</p> <p>1543 20th St N Birmingham, AL 35234-2650</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5019</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$62.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.729	<p>Nonpriority creditor's name and mailing address Tamita Williams</p> <p>1543 20th St N Birmingham, AL 35234-2650</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5019</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$800.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.730	<p>Nonpriority creditor's name and mailing address Tammy Andrew</p> <p>PO Box 875 Asheboro, NC 27204</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5055</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$200.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.731	<p>Nonpriority creditor's name and mailing address Taylor Bastin-Platt</p> <p>205 W Shelby St Falmouth, KY 41040-1139</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5345</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,307.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.732	<p>Nonpriority creditor's name and mailing address Taylor Whisneant</p> <p>1030 Dalton St Bridge City, TX 77611-2610</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5175</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$611.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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3.733	Nonpriority creditor's name and mailing address Teena Perry 13 Hidden Hills Ln Ellisville, MS 39437-6401 Date(s) debt was incurred ____ Last 4 digits of account number 4323	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$716.25
3.734	Nonpriority creditor's name and mailing address Teresa Hail 604 Rolling Acres Dr Kathleen, GA 31047-1608 Date(s) debt was incurred ____ Last 4 digits of account number 5340	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.00
3.735	Nonpriority creditor's name and mailing address Teresa Saenz 11 Moonrise Cir Sacramento, CA 95834-3820 Date(s) debt was incurred ____ Last 4 digits of account number 4433	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$938.00
3.736	Nonpriority creditor's name and mailing address Terri Russell 1003 Crest Rd Leeds, AL 35094-2306 Date(s) debt was incurred ____ Last 4 digits of account number 5262	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$978.00
3.737	Nonpriority creditor's name and mailing address Terri Easter 1354 Montague St NW Washington, DC 20011-2876 Date(s) debt was incurred ____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,170.00
3.738	Nonpriority creditor's name and mailing address Terri Huff 7295 Murley Beaumont, TX 77701 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00
3.739	Nonpriority creditor's name and mailing address Terri Pendergrass 13219 Oakwood Rd Zimmerman, MN 55398-9331 Date(s) debt was incurred ____ Last 4 digits of account number 5003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,094.00

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3.740	<p>Nonpriority creditor's name and mailing address Terry Williams</p> <p>2601 Quail Run San Marcos, TX 78666-9477</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5048</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,398.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.741	<p>Nonpriority creditor's name and mailing address Terry Flowers</p> <p>1056 Bretts Way Cantonment, FL 32533-5641</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5361</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,280.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.742	<p>Nonpriority creditor's name and mailing address The Travel Company</p> <p>1404 N 18th St Monroe, LA 71201-4912</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$229.25</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.743	<p>Nonpriority creditor's name and mailing address Theresa Bennett</p> <p>16607 Almy Rd Howard City, MI 49329-9570</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5207</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,265.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.744	<p>Nonpriority creditor's name and mailing address Theresa Callen</p> <p>12807 Cradle Mountain Ln Lakeside, CA 92040-5727</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>3307</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$84,893.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.745	<p>Nonpriority creditor's name and mailing address Theresa Shjandemaar</p> <p>3117 Eagle Butte Ave Frederick, CO 80516-2611</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5318</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,252.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.746	<p>Nonpriority creditor's name and mailing address Theresa Smith</p> <p>1622 Eugene St Port Neches, TX 77651-3216</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5175</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$474.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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3.747	Nonpriority creditor's name and mailing address Theresa Staab 6 Sherman Pl Bethpage, NY 11714 Date(s) debt was incurred ____ Last 4 digits of account number 5293	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,102.00
3.748	Nonpriority creditor's name and mailing address Thomas Hearl 1625 SW 4th Pl Cape Coral, FL 33991-5403 Date(s) debt was incurred ____ Last 4 digits of account number 5251	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$953.18
3.749	Nonpriority creditor's name and mailing address Thomas Nawn 523 Pewter Dr Exton, PA 19341-2077 Date(s) debt was incurred ____ Last 4 digits of account number 5017	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,600.00
3.750	Nonpriority creditor's name and mailing address Thomas (Joe) Campbell 415 Pisgah Way Calhoun, GA 30701-1939 Date(s) debt was incurred ____ Last 4 digits of account number 5260	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,634.00
3.751	Nonpriority creditor's name and mailing address Thomas Edwards 817 McArthur Dr Port Neches, TX 77651-2224 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00
3.752	Nonpriority creditor's name and mailing address Tiffany Black 10670 N Whitney Ave Fresno, CA 93730-5959 Date(s) debt was incurred ____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.753	Nonpriority creditor's name and mailing address Tiffany Black 10670 N Whitney Ave Fresno, CA 93730-5959 Date(s) debt was incurred ____ Last 4 digits of account number 5034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,240.00

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3.754	Nonpriority creditor's name and mailing address Timothy Ryan 3004 Looking Glass Ct Virginia Beach, VA 23456-8277 Date(s) debt was incurred ____ Last 4 digits of account number 5111	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$715.00
3.755	Nonpriority creditor's name and mailing address Timothy Tisdale 283 Saint Phillips Church Rd Prosperity, SC 29127-6936 Date(s) debt was incurred ____ Last 4 digits of account number 4980	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,709.11
3.756	Nonpriority creditor's name and mailing address Tonia Epps PO Box 443 Scottsville, TX 75688 Date(s) debt was incurred ____ Last 4 digits of account number 4097	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,273.00
3.757	Nonpriority creditor's name and mailing address Tonirae Vojacek 3935 E Rough Rider Rd Unit 1179 Phoenix, AZ 85050-7357 Date(s) debt was incurred ____ Last 4 digits of account number 5280	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,128.00
3.758	Nonpriority creditor's name and mailing address Tony Camara 2022 Red Hawk Rd Prattville, AL 36067-8523 Date(s) debt was incurred ____ Last 4 digits of account number 4339	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,648.00
3.759	Nonpriority creditor's name and mailing address Tonya Hoffman 2004 Jadewood Dr Midland, TX 79707-5057 Date(s) debt was incurred ____ Last 4 digits of account number 4912	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,738.00
3.760	Nonpriority creditor's name and mailing address Tonya Alexander 301 Millside Dr Warner Robins, GA 31088-8159 Date(s) debt was incurred ____ Last 4 digits of account number 5340	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$80.00

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3.761	<p>Nonpriority creditor's name and mailing address Tonya Matthews</p> <p>117 Dogwood Dr Hazlehurst, MS 39083-2903</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5301</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$6,160.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.762	<p>Nonpriority creditor's name and mailing address Tora Christopher</p> <p>409 Canter Way Jefferson, GA 30549-1445</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5190</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,200.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.763	<p>Nonpriority creditor's name and mailing address Tracy Anderson</p> <p>2910 Kerry Forest Pkwy Tallahassee, FL 32309-6892</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5354</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,700.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.764	<p>Nonpriority creditor's name and mailing address Tramaine Yarbrough</p> <p>5125 Summer Place Pkwy Hoover, AL 35244-3099</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5258</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,776.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.765	<p>Nonpriority creditor's name and mailing address Travel Concepts Inc. (Lenexa)</p> <p>9324 Rosner Dr Ste A Lenexa, KS 66219-2214</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$110.80</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.766	<p>Nonpriority creditor's name and mailing address Travel Equity Partners (dba Travel Ques</p> <p>70 Mansell Ct Ste 100 Roswell, GA 30076-4857</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$206.50</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.767	<p>Nonpriority creditor's name and mailing address Travelpoort, LP</p> <p>PO Box CS198537 Atlanta, GA 30301-8537</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$75.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Name

3.768	Nonpriority creditor's name and mailing address Trudy Hughes 12121 S Fox Den Dr Knoxville, TN 37934-3727 Date(s) debt was incurred _____ Last 4 digits of account number <u>4973</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,398.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.769	Nonpriority creditor's name and mailing address Trudy Crain 12985 N Ovenell Ln Burlington, WA 98233-3816 Date(s) debt was incurred _____ Last 4 digits of account number <u>5223</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,352.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.770	Nonpriority creditor's name and mailing address Twin America LLC 1430 Broadway Rm 507 New York, NY 10018-3064 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$792.93</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.771	Nonpriority creditor's name and mailing address Twynette Goggins 2117 Carion Ct Unit 104 Birmingham, AL 35201 Date(s) debt was incurred _____ Last 4 digits of account number <u>5019</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$248.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.772	Nonpriority creditor's name and mailing address Univa Shaw 645 Westview Rd Chattanooga, TN 37415-3407 Date(s) debt was incurred _____ Last 4 digits of account number <u>5305</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,398.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.773	Nonpriority creditor's name and mailing address Unum Life Insurance Company of America PO Box 406968 Atlanta, GA 30384-6968 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$21.50</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.774	Nonpriority creditor's name and mailing address Valarie Eason 1112 46th St N Birmingham, AL 35212-1335 Date(s) debt was incurred _____ Last 4 digits of account number <u>5019</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$125.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **New York City Vacations, Inc.**
Name

Case number (if known)

3.775	Nonpriority creditor's name and mailing address Velma Powers 2627 NW Pollard Ave Lawton, OK 73505-1912 Date(s) debt was incurred ____ Last 4 digits of account number 4989	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,279.00
3.776	Nonpriority creditor's name and mailing address Velma Dunn Cooper 29714 Orchard Grove Dr Tomball, TX 77377-3965 Date(s) debt was incurred ____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$243.00
3.777	Nonpriority creditor's name and mailing address Verizon Wireless PO Box 25505 Lehigh Valley, PA 18002-5505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Vendor Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$86.01
3.778	Nonpriority creditor's name and mailing address Vicki Steele 473 Walter Dr West Jefferson, NC 28694-9372 Date(s) debt was incurred ____ Last 4 digits of account number 4951	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,786.00
3.779	Nonpriority creditor's name and mailing address Vicki Oxley 2550 S Ellsworth Rd Unit 543 Mesa, AZ 85209-2467 Date(s) debt was incurred ____ Last 4 digits of account number 5029	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: 195029 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,580.00
3.780	Nonpriority creditor's name and mailing address Vicki Thomas 12704 Shondel Rd Rittman, OH 44270-9513 Date(s) debt was incurred ____ Last 4 digits of account number 4782	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,230.50
3.781	Nonpriority creditor's name and mailing address Vicki Vantrease 189 Baker Rd Martin, TN 38237-3819 Date(s) debt was incurred ____ Last 4 digits of account number 4724	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Customer prepayment or Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,566.43

Name

3.782	Nonpriority creditor's name and mailing address Vicky Gaddy 108 Millet Cir Cantonment, FL 32533-7887 Date(s) debt was incurred _____ Last 4 digits of account number <u>5361</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,953.07 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.783	Nonpriority creditor's name and mailing address Victor Eyre 305 Glen Ellen Dr Pineville, LA 71360-4439 Date(s) debt was incurred _____ Last 4 digits of account number <u>5174</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$400.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.784	Nonpriority creditor's name and mailing address Victor Martinez 1608 Highway 22 W Falmouth, KY 41040-8865 Date(s) debt was incurred _____ Last 4 digits of account number <u>5345</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,800.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.785	Nonpriority creditor's name and mailing address Victoria Sidon 113 Ohio St Wheeling, WV 26003-2118 Date(s) debt was incurred _____ Last 4 digits of account number <u>5363</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$458.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.786	Nonpriority creditor's name and mailing address Victoria Chastain 651 Iris Ln Winder, GA 30680-3786 Date(s) debt was incurred _____ Last 4 digits of account number <u>5590</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.787	Nonpriority creditor's name and mailing address Victoria McCabe 724 Killdeer Ln Plymouth, WI 53073-4994 Date(s) debt was incurred _____ Last 4 digits of account number <u>5331</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,560.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.788	Nonpriority creditor's name and mailing address Victoria McFadyen PO Box 1693 Key West, FL 33041 Date(s) debt was incurred _____ Last 4 digits of account number <u>4769</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

	Debtor New York City Vacations, Inc.	Case number (if known) _____
	Name _____	

3.789	Nonpriority creditor's name and mailing address Vincent O Driscoll 7 Heritage Dr Plattsburgh, NY 12901 Date(s) debt was incurred _____ Last 4 digits of account number 5281	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,696.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.790	Nonpriority creditor's name and mailing address Virginia DeMoss 403 N Jones Ave Maquoketa, IA 52060 Date(s) debt was incurred _____ Last 4 digits of account number 5148	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,220.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.791	Nonpriority creditor's name and mailing address Virginia Mazry 501 Cliff Dr Aptos, CA 95003-5309 Date(s) debt was incurred _____ Last 4 digits of account number 5113	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,272.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.792	Nonpriority creditor's name and mailing address Virginia Davis 1135 Woodland Trce Cumming, GA 30041-7268 Date(s) debt was incurred _____ Last 4 digits of account number 4369	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.793	Nonpriority creditor's name and mailing address Vivian Carr 7927 Blazing Gap Missouri City, TX 77459-6054 Date(s) debt was incurred _____ Last 4 digits of account number 3324	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,167.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.794	Nonpriority creditor's name and mailing address Wallace State Hanceville PO Box 2000 Hanceville, AL 35077 Date(s) debt was incurred _____ Last 4 digits of account number 4502	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$22,075.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.795	Nonpriority creditor's name and mailing address Wanda Schenk 3296 FM 2864 Nacogdoches, TX 75965-8100 Date(s) debt was incurred _____ Last 4 digits of account number 5175	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$481.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer prepayment or Deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.796	<p>Nonpriority creditor's name and mailing address Ward Fredrickson</p> <p>2924 Gentry Cir Bismarck, ND 58503-0158</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5376</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$9,211.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.797	<p>Nonpriority creditor's name and mailing address Wendell Boner</p> <p>115 E 11th St Shiner, TX 77984-5419</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5324</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,743.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.798	<p>Nonpriority creditor's name and mailing address Wendy Navarro</p> <p>2593 E 1569th Rd Ottawa, IL 61350-9261</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5043</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,973.72</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.799	<p>Nonpriority creditor's name and mailing address Wendy Thompson</p> <p>13505 290th Ave NW Zimmerman, MN 55398-8692</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5003</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,074.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.800	<p>Nonpriority creditor's name and mailing address William Knight</p> <p>102 Tulip Ln Westminster, SC 29693-6446</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5292</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,488.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.801	<p>Nonpriority creditor's name and mailing address Winston Hensley</p> <p>1700 Massanetta Springs Rd Rockingham, VA 22801-2412</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number <u>5322</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,237.00</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer prepayment or Deposit</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.802	<p>Nonpriority creditor's name and mailing address World Travel (Fort Pierce)</p> <p>2403 S 4th Street US Hwy # 1 Fort Pierce, FL 34945-5996</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$88.40</u></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Vendor</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor **New York City Vacations, Inc.**
Name

Case number (if known)

3.803 Nonpriority creditor's name and mailing address
Yvonne Culligan

**1005 16th Ave S
Princeton, MN 55371-2326**

Date(s) debt was incurred

Last 4 digits of account number **5003**

As of the petition filing date, the claim is: *Check all that apply.*

\$2,587.00

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Customer prepayment or Deposit**

Is the claim subject to offset? ☒ No ☐ Yes

3.804 Nonpriority creditor's name and mailing address
Zack Kincheloe

**1174 Vallombrosa Ave
Chico, CA 95926-2847**

Date(s) debt was incurred

Last 4 digits of account number **5307**

As of the petition filing date, the claim is: *Check all that apply.*

\$976.00

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Customer prepayment or Deposit**

Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the
related creditor (if any) listed?

Last 4 digits of
account number, if
any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 2,227,153.12

5c.	\$ 2,227,153.12
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Fill in this information to identify the case:

Debtor name New York City Vacations, Inc.

United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE
DIVISION

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contracts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

**Office Lease at 300
Market St
Kingston, PA
18704-5426**

State the term remaining

List the contract number of any government contract _____

**The Market Street Partnership
300 Market St
Kingston, PA 18704-5426**

Fill in this information to identify the case:

Debtor name New York City Vacations, Inc.

United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE
DIVISION

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

United States Bankruptcy Court
Middle District of Pennsylvania, Wilkes-Barre Division

In re **New York City Vacations, Inc.**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>7,500.00</u>
Prior to the filing of this statement I have received	\$	<u>7,500.00</u>
Balance Due	\$	<u>0.00</u>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

For all services not set forth in subparagraphs a, b, and c above, including responding to creditors inquiries, negotiating with creditors and attending and preparing for hearings and adversarial and contested proceedings of any kind, (except the meeting of creditors) at a rate of \$350.00 per hour. The above fee is exclusive of the Debtor's advance of a filing fee of \$335.00 in the case of a chapter 7 filing.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

June 10, 2020

Date

/s/ David Harris

David Harris

Signature of Attorney

Law Office of David J. Harris

67-69 Public Sq Ste 700

Wilkes Barre, PA 18701-2515

(570) 823-9400

dh@lawofficeofdavidharris.com

Name of law firm